


**2008 FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 24, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # P93000072441 1. Entity Name NEW TAMPA, INC.	
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Principal Place of Business 6000 COMPTON ESTATES WAY TAMPA, FL 33647 US	Mailing Address 6000 COMPTON ESTATES WAY TAMPA, FL 33647 US
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**DO NOT WRITE IN THIS SPACE**



01072008 No Chg-P CR2E034 (11/05)

4. FEI Number 22-3260340	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

INGLIS, JOHN S  
 SHUMAKER, LOOP & KENDRICK, LLP  
 101 E KENNEDY BLVD #2800  
 TAMPA, FL 33602

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KINSLER, WARREN 6000 COMPTON ESTATES WAY TAMPA, FL 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILF, LEONARD 820 MORRIS TURNPIKE SHORT HILLS, NJ 07078
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILF, ZYGMUNT 820 MORRIS TURNPIKE SHORT HILLS, NJ 07078
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILF, MARK 820 MORRIS TURNPIKE SHORT HILLS, NJ 07078
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000793244  
 01/25/08-80001-008 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Warren Kinsler 1-18-08 (813) 910-7914

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #