

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004598

FILED
Feb 27, 2005
Secretary of State

Entity Name: TAMPA BAY B.E.E.R.S. (BREWING ENTHUSIASTS ENJOYING REAL SUDS, INC.

Current Principal Place of Business:

5916 N ITHMAR
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

5916 N ITHMAR AVE
TAMPA, FL 33604

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HAHN, KAREN V
5916 N ITHMAR
TAMPA, FL 33604 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GUTCHER, GREGORY D JR.
Address: 7127 HOLLOWELL DR
City-St-Zip: TAMPA, FL 33634

Title: T () Delete
Name: EALES, RAY
Address: 5916 N ITHMAR
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: GLADISH, JEFFREY
Address: 1307 EAST FLORA
City-St-Zip: TAMPA, FL 33604

Title: D () Delete
Name: STOBER, MARK
Address: 14647 PINE GLENN CIRCLE
City-St-Zip: LUTZ, FL 33549

Title: D () Delete
Name: O'REGAN, PHILIP J
Address: 7506 N CAMERON AVE
City-St-Zip: TAMPA, FL 33614

Title: P () Delete
Name: HAHN, KAREN
Address: 5916 N ITHMAR
City-St-Zip: TAMPA, FL 33604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FOUCH, MICHAEL E
Address: 5918 N OTIS AVE
City-St-Zip: TAMPA, FL 33604

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KAREN V HAHN

P

02/27/2005

Electronic Signature of Signing Officer or Director

Date