

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 713451

FILED
Mar 05, 2006
Secretary of State

Entity Name: TAMPA BAY AUBURN CLUB, INC.

Current Principal Place of Business:

13324 LAKE GEORGE PLACE
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 271057
TAMPA, FL 336881057 US

New Mailing Address:

FEI Number: 71-3451392

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DYAL, LUCIUS M JR
1400, 501 E KENNEDY BLVD
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

RYAN, ARTHUR N
6420 BAYSHORE BLVD
TAMPA, FL 33611 US

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: ARTHUR N RYAN

03/05/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: RYAN, ARTHUR
Address: 6420 S BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: JACOBS, JOHN
Address: 3322 FOXRIDGE CIRLE
City-St-Zip: TAMPA, FL 33618

Title: V () Delete
Name: JIM PERDUE,
Address: 3046 SAMARA DR.
City-St-Zip: TAMPA, FL 33618

Title: S () Delete
Name: FOWLER, WAYNE
Address: 13324 LAKE GEORGE PLACE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: CLARKE, KIM
Address: 3310 ELIZABETH COURT
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: WALL, HINDMAN
Address: 12910 BRUSHY PINE PL
City-St-Zip: TAMPA, FL

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
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Address:
City-St-Zip:

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

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 Chapter 119, 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: ARTHUR N RYAN

P

03/05/2006

Electronic Signature of Signing Officer or Director

Date