

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 16, 2003 8:00 am**  
**Secretary of State**

06-16-2003 90139 009 \*\*\*\*61.25

**DOCUMENT # 710531**

1. Entity Name

**THE TAMPA JAYCEES, INC.**



Principal Place of Business

**501 KNIGHTS RUN AVENUE  
STE. 2121  
TAMPA FL 33602-5946  
US**

Mailing Address

**P.O. BOX 75819  
TAMPA FL 33675  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0536835**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CUMMING, J. BRUCE JR  
501 KNIGHTS RUN AVENUE  
STE. 2121  
TAMPA FL 33602**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

|  |  |  |
|--|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PD<br/>KAUFMAN, HEATHER I<br/>11827 96TH PLACE<br/>SEMINOLE FL 33772-2237</b>             | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VPD<br/>ECKER, CASSANDRA<br/>5808 NORTH MIAMI PLACE<br/>TAMPA FL 33604</b>                | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VPD<br/>ISBITZ, HEATHER<br/>6161 N. MEMORIAL HWY, APT. 807<br/>TAMPA FL 33615</b>         | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VPD<br/>WEST, MARCIE<br/>362 LOS PRADOS DRIVE<br/>SAFETY HARBOR FL 34695</b>              | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VPD<br/>WATFORD, SABRINA<br/>1408 SOUTH LORENZO AVE UNIT B-7<br/>TAMPA FL 33629</b>       | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>ST<br/>CUMMING, J. BRUCE JR<br/>501 KNIGHTS RUN AVE UNIT 2121<br/>TAMPA FL 33602-5946</b> | <input type="checkbox"/> Delete            |

|  |  |  |
|--|--|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>President/Director<br/>Joanne Bohn<br/>3607 West Cleveland Street<br/>Tampa, Florida 33609</b>                        | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Vice President/Director<br/>Matthew Dolliver<br/>3012 Old Village Way<br/>Oldsmar, Florida 34677</b>                  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Vice President/Director<br/>Henry Gerdes<br/>5522 Carrollwood Key Drive<br/>Tampa, Florida 33624</b>                  | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Vice President/Director<br/>Matt Taylor<br/>4003 South Westshore Boulevard, Unit 3508<br/>Tampa, Florida 33611</b>    | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Vice President/Director<br/>Daniel Colucci<br/>14535 Bruce B. Downs Boulevard, Unit 1037<br/>Tampa, Florida 33613</b> | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>Secretary/Treasurer<br/>J. Bruce Cumming, Jr.<br/>501 Knights Run Avenue, Unit 2121<br/>Tampa, Florida 33602-5946</b> | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |

12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have legal effect in Florida made on 06/16/2003. 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

**(813) 221-2290**

CR2E037 (10/02)