2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State
01-09-2006 90036 042 ****61.25

DOCUMENT # 714991

1. Entity Name
UNITED METHODIST RETIREMENT CENTER OF TAMPA, INC.

Principal Place of Business	Mailing Address
400 E. HARRISON ST TAMPA, FL 33602-3444 US	400 E. HARRISON ST TAMPA, FL 33602-3444 US

66UUU678

01042006 Chg-NP CR2E037 (11/05)

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 59-1229023 ☐ 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
CORP DIRECT AGENTS INC ~~PO BOX 38413~~ 515 E. Park Avenue TALLAHASSEE, FL ~~32315~~ 32301	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25 Due by May 1, 2006

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P ABDONEY, JAMES A 4710 TAMBAY TAMPA, FL 33611	☐ Delete	John Streater 537 W. Davis Blvd Tampa, Fl 33606 (Director)	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BROCK, RUTH 2329 MERRILY CIRCLE SEFFNER, FL 33584	☐ Delete	Mary Collins 400 E Harrison St #1105 Tampa Fl 33602 (Director)	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BERRY, DAVID 7109 DUCAN AVE TAMPA, FL 33604	☐ Delete	Rita Lowe 2403 W. Ardson Pl. #602B Tampa, Fl 33629 (Director)	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCLAUGHLIN, ROBIN 3416 SAN JUAN ST W. TAMPA, FL 336297902	☒ Delete	Mary Capitano 12407 N. 22nd St # B101 Tampa, Fl 33612 (Director)	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLIAMS, JOYCE 1000 S HARBOUR ISLAND BLVD # 2510 TAMPA, FL 33606	☒ Delete	James Ware 4100 W. Kennedy Blvd. #130 Tampa, Fl 33609 (Director)	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CHATFIELD, JUDITH M 400 E. HARRISON ST. TAMPA, FL 336023444	☐ Delete	Luci Norlin 4003 W. McKay Avenue Tampa, Fl 33609 (director)	☐ Change ☒ Addition

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 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: Joann C Abdoney MS. 1-5-06 813-229-2791
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #