## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT #725134** 03-03-2005 90175 038 \*\*\*\*61.25 1. Entity Name TAMPA ROSE SOCIETY, INC. Principal Place of Business Mailing Address 11506 LOUVRE PLACE 11506 LOUVRE PLACE TAMPA, FL 33617 TAMPA, FL 33617 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02252005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number NOT APPLICABLE Applied For Not Applicable Zip Zio Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EVANS, ALEXANDER H Street Address (P.O. Box Number is Not Acceptable) 11506 LOUVRE PLACE TAMPA, FL 33617 City Zip Code FL 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, lyped or printed name of registered agent and the diapptempte. (NOTE: Registered Agent's gnature (equired when constaling) DAIE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PRESIDENT TITLE DILE De ete Change Change KATHY EASOM, EARNEST ZIMBLER, NAME NAME 8013 RIVÉRWOOD ESTATES PL STREET ADDRESS 18501 TURTLE DR. STREET ADDRESS RIVERVIEW FL 33569 CITY-ST-ZIP LUTZ, FL 33549 CITY-ST-ZIP VICE PRESIDENT TO Change BILE TITLE Delete ☐ Addition WARREN, GRETCHEN NAME ZIMBLER, KATHY NAME 6215 ORAN STREET STREET ADDRESS 8013 RIVERWOOD ESTATES PL. STREET ADORESS CITY-ST-ZIP RIVERVIEW, FL 33569 CITY-ST-ZIP FL 33610 TAMPA 2VP Delete ☐ Addition TITLE WHITCOMB, AL **EVANS, ANNE** NAME NAME STREET ADDRESS 11506 LOUVRE PLACE STREET ADDRESS 24189- BALMORAL-LANE. CITY-ST-7IP BROOKSVILLE CITY-ST-ZIP TAMPA, FL 33617 ドレ 34601 TITLE Delete TITLE BERTCH, MARILYN 1045 WHISPER RUN NAME WARREN, GRETCHEN **6215 ORAN STREET** STREET ADDRESS STREET ADDRESS ムレイス 33558 CITY-ST-ZIP FL CITY-ST-ZIP **TAMPA, FL 33610** Delete TITLE Change ☐ Addition TITLE **EVANS, WILLIS** JUNO, BOB NAME NAME TRAIL 13240 LEGENAS STREET ADDRESS 8635 MONASSAS RD. STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33635 CITY-ST-ZIP FL 33525 DADE CITY TITLE ☐ Delete ☐ Change ☐ Addition **EVANS, ALEXANDER** NAME NAME STREET ADDRESS 11506 LOUVRE PLACE STREET ADDRESS

FILED

Mar 03, 2005 8:00 am

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Alexander Victoria ALEXANDER H EVANS 2/25/05 813980299 6

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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 the same legal effect as it 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

**TAMPA, FL 33617**