2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2007
Secretary of State

DOCUMENT# 738301

Entity Name: TAMPA CROSSROADS, INC.

Current Principal Place of Business:

5118 N. NEBRASKA AVENUE
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

5118 N. NEBRASKA AVENUE
TAMPA, FL 33603

New Mailing Address:

FEI Number: 59-1743719 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTINEZ, ELVIN
13TH CIRCUIT / FIFTH FLOOR
COURTHOUSE ANNEX
TAMPA, FL 33602 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: VP ( ) Delete
Name: HALL, TOM
Address: 520 FAULKENBURG ROAD
City-St-Zip: TAMPA, FL 33619

Title: PE ( ) Delete
Name: KEMP, PAT ESQ
Address: 5118 SEMINOLE AVE
City-St-Zip: TAMPA, FL 33603

Title: D ( ) Delete
Name: FINKEL, DAVE
Address: 2404 JELTON AVE
City-St-Zip: TAMPA, FL 33629

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:

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: SARA ROMEO ED 01/03/2007

Electronic Signature of Signing Officer or Director — Date