

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90213 017 ****61.25

DOCUMENT # 746541

1. Entity Name
FLORIDA POWER CLUB



Principal Place of Business
**C/O PAT CORBISSERO
6565 38TH AVENUE NORTH
SAINT PETERSBURG, FL 33710 US**

Mailing Address
**C/O PAT CORBISSERO
6565 38TH AVENUE NORTH
SAINT PETERSBURG, FL 33710 US**

50014084



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02152006

Chg-NP

CR2E037 (11/05)

4. FEI Number
59-6004292

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

**CORBISSERO, PATRICIA
6565 38TH AVENUE NORTH
SAINT PETERSBURG, FL 33710**

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

**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 P ☐ Delete
NAME DUVALL, DEBORAH
STREET ADDRESS 100 CENTRAL AVENUE
CITY-ST-ZIP SAINT PETERSBURG, FL 33701

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☒ Delete
NAME ROSENBERG, JOE
STREET ADDRESS 100 CENTRAL AVE
CITY-ST-ZIP SAINT PETERSBURG, FL 33701

TITLE ☐ Change ☒ Addition
NAME Jay Gallagher
STREET ADDRESS 100 Central Ave
CITY-ST-ZIP Saint Petersburg FL 33701

TITLE T ☐ Delete
NAME CORBISSERO, PATRICIA
STREET ADDRESS 6565 38TH AVENUE NORTH
CITY-ST-ZIP SAINT PETERSBURG, FL 33710

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME MCREE, CYNDI
STREET ADDRESS 100 CENTRAL AVE
CITY-ST-ZIP SAINT PETERSBURG, FL 33701

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME RATTLIFF, WES
STREET ADDRESS 100 CENTRAL AVE
CITY-ST-ZIP SAINT PETERSBURG, FL 33701

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME SALVAREZZA, ANTHONY
STREET ADDRESS 100 CENTRAL AVE
CITY-ST-ZIP SAINT PETERSBURG, FL 33701

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Patricia L. Corbissiero *Patricia Corbissiero* 3/16/06 727-384-7820