

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 08:00 AM
Secretary of State

DOCUMENT # 748876 1. Entity Name JOHN KNOX VILLAGE OF TAMPA BAY, INC.		
Principal Place of Business 4100 FLETCHER AVENUE TAMPA, FL 33613	Mailing Address ATTN: ISAAC MALLAH 3001 W DR MLK JR BLVD TAMPA, FL 33607 US	
<div style="border: 1px solid black; padding: 10px; width: 80%; margin: auto;"> DO NOT WRITE IN THIS SPACE </div>		
<div style="display: flex; justify-content: space-between;"> 04072005 No Chg-NP CR2E037 (10/03) </div>		
4. FEI Number 58-1377711		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent CHIEF FINANCIAL OFFICER P.O. BOX 6200 32314-6200 200 E. GAINES ST. TALLAHASSEE, FL 32399		
<div style="border: 1px solid black; padding: 10px; width: 80%; margin: auto;"> DO NOT WRITE IN THIS SPACE </div>		
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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____		
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHARKEY, GLADYS SR 3001 W DR MLK JR BLVD TAMPA, FL 33607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MALLAH, ISAAC 3001 W DR MLK JR BLVD TAMPA, FL 33607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD YATES, DIANE 3001 W DR MLK JR BLVD TAMPA, FL 33607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DISHONG, DENNIS 3001 W DR MLK JR BLVD TAMPA, FL 33607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YODER, CATHY 3001 W DR MLK JR BLVD TAMPA, FL 33607	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<div style="border: 1px solid black; padding: 10px; height: 100px;"> <div style="text-align: center; padding-top: 50px;"> DO NOT WRITE IN THIS SPACE </div> </div>	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 or other like empowered.		
SIGNATURE: 		4-26-05 (813) 870-4020 Date Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Isaac Mallah		