## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#759161** 

Apr 01, 2005 Secretary of State

Entity Name: AIA TAMPA BAY, INC./A CHAPTER OF THE AMERICAN INSTITUTE OF ARCHITECTS

**Current Principal Place of Business: New Principal Place of Business:** 

200 N TAMPA ST, STE 100 TAMPA, FL 33602

**Current Mailing Address: New Mailing Address:** 

200 N TAMPA ST, STE 100 TAMPA, FL 33602

FEI Number: 59-2149693 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MAGES, DAWN 200 N. TAMPA ST 100 TAMPA, FL 33602

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:

Title:

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

**PRES** () Delete BENSON, LELAND AIA Name: 125 15TH AVENUE NE Address: City-St-Zip: ST. PETE. FL 33704

() Delete SMITH, GARY Name:

Address: 5300 W. CYPRESS STREET, #300

City-St-Zip: TAMPA, FL 33607

Title: () Delete GOLDSTEIN, HARVEY Name: 300 S HYDE PARK AVE #201 Address:

City-St-Zip: TAMPA, FL 33606

Title: ( ) Delete Name: STRIBLING, RANDY

4909 N RIVER BLVD Address: City-St-Zip: TAMPA, FL 33603

Title: WD () Delete HOFFMAN, ED Name:

29 WEST ORANGE STREET Address: City-St-Zip: TARPON SPRINGS, FL 34689

Title: () Delete SALAGA, VIVÌAN Name: Address: 1607 N FRANKLIN STREET

TAMPA, FL 33602 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

Name: SMITH GARY AIA

Address: 5300 W. CYPRESS STREET, #300

City-St-Zip: TAMPA, FL 33607

Title: (X) Change ( ) Addition

Name: GOLDSTEIN, HARVEY

Address: 5300 W. CYPRESS STREET. #300

City-St-Zip: TAMPA, FL 33607

Title: (X) Change ( ) Addition

KARAMITSANIS, PETE Name: Address: 3416 SOUTH VIRGINIA COURT

City-St-Zip: TAMPA, FL 33629

Title: (X) Change ( ) Addition

Name: STRIBLING, RANDY Address: 4909 N RIVER BLVD City-St-Zip: TAMPA, FL 33603

Title: () Change () Addition

Name: Address: City-St-Zip:

> Title: (X) Change ( ) Addition

PRITTS, RICHARD Name:

Address: 4301 ANCHOR PLAZA PKWY, #100

TAMPA, FL 33634 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAWN MAGES, EXECUTIVE DIRECTOR

EX D

04/01/2005