

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006604

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: PERA CITY PLAZA TAMPA, INC.

## Current Principal Place of Business:

950 17TH STREET STE. 1850  
DENVER, CO 80202

## New Principal Place of Business:

## Current Mailing Address:

950 17TH STREET STE. 1850  
DENVER, CO 80202

## New Mailing Address:

FEI Number: 20-1837116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: C ( ) Delete  
Name: PAQUETTE, JENNIFER  
Address: 1300 LOGAN STREET  
City-St-Zip: DENVER, CO 80203

Title: P ( ) Delete  
Name: JUDGE, WADE  
Address: 950 17TH STREET STE 1850  
City-St-Zip: DENVER, CO 80202

Title: VP ( ) Delete  
Name: SPRITZER, KATHRYN G  
Address: 950 17TH STREET STE. 1850  
City-St-Zip: DENVER, CO 80202

Title: S ( ) Delete  
Name: SCHAFF, PETER H  
Address: 200 E RANDOLPH DRIVE  
City-St-Zip: CHICAGO, IL 60601

Title: T ( ) Delete  
Name: WOODROW, KIMBALL C  
Address: 200 E. RANDOLPH DRIVE  
City-St-Zip: CHICAGO, IL 60601

## 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:

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 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: KATHRYN G. SPRITZER

VP

01/04/2005

Electronic Signature of Signing Officer or Director

Date