2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007
Secretary of State

DOCUMENT# F06000006294

Entity Name: THE BAILEY FAMILY FOUNDATION OF TAMPA, INC.

Current Principal Place of Business:

550 N REO STREET SUITE 300
TAMPA, FL 336091065

New Principal Place of Business:

Current Mailing Address:

PO BOX 803
NEWINGTON, VA 221220803

New Mailing Address:

FEI Number: 54-1850780 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAILEY, R KENT
550 N REO STREET SUITE 300
TAMPA, FL 336091065 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: DP ( ) Delete
Name: BAILEY, RON K
Address: 550 N REO STREET SUITE 300
City-St-Zip: TAMPA, FL 336091065

Title: DS ( ) Delete
Name: BAILEY, BEVERLY W
Address: 550 N REO STREET SUITE 300
City-St-Zip: TAMPA, FL 336091065

Title: VPD ( ) Delete
Name: BAILEY, R KYLE
Address: 550 N REO STREET SUITE 300
City-St-Zip: TAMPA, FL 336091065

Title: TD ( ) Delete
Name: BAILEY, R KENT
Address: 550 N REO STREET SUITE 300
City-St-Zip: TAMPA, FL 336091065

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:

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: RON K BAILEY P 02/12/2007

Electronic Signature of Signing Officer or Director — Date