2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006294

FILED Jaņ 16, 2<u>00</u>8 Secretary of State

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

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

550 N REO STREET SUITE 300 912 W. PLATT STREET TAMPA, FL 336091065

SUITE 200

TAMPA, FL 33606

Current Mailing Address: New Mailing Address:

912 W. PLATT STREET PO BOX 803

NEWINGTON, VA 221220803 SUITE 200 TAMPA, FL 33606

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

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

BAILEY, R KENT BAILEY, R KENT

912 W. PLATT STREET 550 N REO STREET SUITE 300 TAMPA, FL 336091065 US SUITE 200 TAMPA, FL 33606 US

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: 01/16/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

BAILEY, RON K BAILEY, RON K Name: Name:

550 N REO STREET SUITE 300 Address: 912 W. PLATT STREET, SUITE 200 Address:

City-St-Zip: TAMPA, FL 336091065 City-St-Zip: TAMPA, FL 33606

Title: DS () Delete Title: (X) Change () Addition

BAILEY, BEVERLY W Name: BAILEY, BEVERLY W Name: 912 W. PLATT STREET, SUITE 200 Address: 550 N REO STREET SUITE 300 Address:

City-St-Zip: TAMPA, FL 336091065 City-St-Zip: TAMPA, FL 33606

Title: VPD () Delete Title: VPD (X) Change () Addition

BAILEY, R KYLE BAILEY, R KYLE Name: Name:

550 N REO STREET SUITE 300 912 W. PLATT STREET, SUITE 200 Address: Address:

City-St-Zip: TAMPA, FL 336091065 City-St-Zip: TAMPA, FL 33606

Title: TD () Delete Title: TD (X) Change () Addition

Name: BAILEY, R KENT Name: BAILEY, R KENT

912 W. PLATT STREET, SUITE 200 Address: 550 N REO STREET SUITE 300 Address:

City-St-Zip: TAMPA, FL 336091065 City-St-Zip: TAMPA, FL 33606

I hereby certify that the information supplied with this filing does not qualify 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 DS 01/16/2008