

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000001337

FILED
Apr 07, 2003
Secretary of State

Entity Name: TAMPA BAY TECHNOLOGY FORUM FOUNDATION, INC.

Current Principal Place of Business:

5445 W. CYPRESS STREET
THIRD FLOOR
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

5445 W. CYPRESS STREET
THIRD FLOOR
TAMPA, FL 33607

New Mailing Address:

FEI Number: 59-3630982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRABER, MARTY
100 N. TAMPA STREET
SUITE 2700
TAMPA, FL 33602 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: D () Delete
Name: TRABER, MARTIN
Address: 100 N. TAMPA STREET, STE 2700
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: BAEUR, MICHELLE
Address: 5445 W. CYPRESS STREET, THIRD FLOOR
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: BRACCO, RINA
Address: 2502 N ROCKY POINT DR. SUITE 220
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: DONSKY, MARTY
Address: 400 N ASHLEY STREET SUITE 2800
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: WALLACE, THOMAS
Address: 1111 N WESTHORE BLVD SUITE 500
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: WALLACE, SUZANNE L
Address: 215 E DAVID BLVD.
City-St-Zip: TAMPA, FL 33606

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:

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: MARTIN A. TRABER

D

04/07/2003

Electronic Signature of Signing Officer or Director

Date