2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2005
Secretary of State

DOCUMENT# N00000007416

Entity Name: PROJECT MANAGEMENT INSTITUTE, TAMPA BAY CHAPTER, INC.

Current Principal Place of Business:

2780 E FOWLER AVENUE
PMB 243
TAMPA, FL 336126297

New Principal Place of Business:

Current Mailing Address:

2780 E FOWLER AVENUE
PMB 243
TAMPA, FL 336126297

New Mailing Address:

FEI Number: 59-3700465 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LITCHFIELD, GLENN
1405 GULF STREAM CIRCLE #204
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

BENNOUNA, SANAA
6345 90TH AVENUE N.
PINELLAS PARK, FL 33782 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: SANAA BENNOUNA 02/08/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPMS ( ) Delete
Name: MCFARLANE, JERRY
Address: 1780 E FOWLER AVENUE, PMB 243
City-St-Zip: TAMPA, FL 33512

Title: P ( ) Delete
Name: WHEELER, MAC
Address: 2870 E FOWLER AVE- PMB 243
City-St-Zip: TAMPA, FL 33612

Title: PP ( ) Delete
Name: MIKOFF, ALLAN
Address: 2870 E FOWLER AVE- PMB 243
City-St-Zip: TAMPA, FL 33612

Title: VPC ( ) Delete
Name: WHITE, DIANE
Address: 2870 E FOWLER AVE- PMB 243
City-St-Zip: TAMPA, FL 33612

Title: TD ( ) Delete
Name: LITCHFIELD, GLENN
Address: 2870 E FOWLER AVE- PMB 243
City-St-Zip: TAMPA, FL 33612

Title: SD ( ) Delete
Name: STEPANICK, PEGGY
Address: 2780 E FOWLER AVE- PMB 243
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: STEPANICK, PEGGY
Address: 1780 E FOWLER AVENUE, PMB 243
City-St-Zip: TAMPA, FL 33512

Title: VPED (X) Change ( ) Addition
Name: BRANTLEY, WAYNE
Address: 2870 E FOWLER AVE- PMB 243
City-St-Zip: TAMPA, FL 33612

Title: VPC (X) Change ( ) Addition
Name: WHITE, DIANE
Address: 2870 E FOWLER AVE- PMB 243
City-St-Zip: TAMPA, FL 33612

Title: VP M (X) Change ( ) Addition
Name: THIELE, DAN
Address: 2870 E FOWLER AVE- PMB 243
City-St-Zip: TAMPA, FL 33612

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change ( ) Addition
Name: ESCOBAR, ALEXANDRA
Address: 2780 E FOWLER AVE- PMB 243
City-St-Zip: TAMPA, FL 33612

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: PEGGY STEPANICK PRES 02/08/2005
Electronic Signature of Signing Officer or Director Date