2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004892

FILED Feb 20, 2006 Secretary of State

Entity Name: TREASURE ISLAND HOTEL/MOTEL/HOSPITALITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 64 DOLPHIN DRIVE TREASURE ISLAND, FL 33706 **Current Mailing Address: New Mailing Address:** 64 DOLPHIN DRIVE TREASURE ISLAND, FL 33706 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COWARD, CAROL L CPA 64 DOLPHIN DRIVE TREASURE ISLAND, FL 33706 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition WEISGERBER, CHARLES Name: Name: 61 DOLPHIN DR Address: Address: City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: Title: Title: (X) Change () Addition () Delete RODRIGUEZ, STEVEN BLACK, HARRY Name: Name: Address: 9980 GULF BLVD Address: 16401 GULF BLVD City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: REDINGTON BEACH, FL 33708 VΡ Title: () Delete Title: (X) Change () Addition RYEL, SUZEE-RAY RYEL, SUZEE-RAY Name: Name: 12620 GULF BLVD. Address: Address: 12620 GULF BLVD. City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706 () Delete Title: VΡ Title: (X) Change () Addition DANNENMILLER, JOANNE Name: WILSON, IAN Name: 10750 GULF BLVD Address: Address: 12274 1ST WEST TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: Title: () Delete Title: (X) Change () Addition BURNS, AMY TSCHAMBER, MARY Name: Name: 10650 GULF BLVD. 10650 GULF BLVD. Address: Address: City-St-Zip: TREASURE ISLAND, FL 33706 City-St-Zip: TREASURE ISLAND, FL 33706 Title: () Delete Title: () Change () Addition DONOVAN, KAREN Name: Name: Address: 12600 GULF BLVD Address: TREASURE ISLAND, FL 33706 City-St-Zip: 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: CAROL L. COWARD CPA 02/20/2006