2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# N01000008138

Entity Name: FRIENDS OF TAMPA PUBLIC ART FOUNDATION, INC.

Current Principal Place of Business:

101 EAST KENNEDY BLVD.
SUITE 2800
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

PO BOX 2912
TAMPA, FL 33601

New Mailing Address:

FEI Number: 04-3624363 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

YADLEY, GREGORY C ESQ.
101 EAST KENNEDY BLVD., SUITE 2800
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:	WEISSE, MARSHA	
Address:	4320 EL PRADO #22	
City-St-Zip:	TAMPA, FL 33629	
Title:	D	( ) Delete
Name:	ESQUIVEL, JULIO	
Address:	101 E. KENNEDY BLVD., SUITE 2800	
City-St-Zip:	TAMPA, FL 33602	
Title:	DT	( ) Delete
Name:	CHAVEZ, MELINDA	
Address:	400 N. TAMPA STREET, SUITE 1140	
City-St-Zip:	TAMPA, FL 33602	
Title:	DP	( ) Delete
Name:	OSTERWEIL, LESLIE	
Address:	120 MARTINIQUE AVE	
City-St-Zip:	TAMPA, FL 33606	
Title:	DV	( ) Delete
Name:	YADLEY, GREGORY C ESQ.	
Address:	101 E. KENNDY BLVD., SUITE 2800	
City-St-Zip:	TAMPA, FL 33602	
Title:	DS	( ) Delete
Name:	GANDEE, CYNTHIA	
Address:	401 W. KENNEDY 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 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: MELINDA CHAVEZ DT 03/31/2009

Electronic Signature of Signing Officer or Director — Date