

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90001 001 \*\*\*\*61.25

**DOCUMENT # N02000000724**

1. Entity Name  
**A GIFT FOR TEACHING OF TAMPA BAY, INC.**



Principal Place of Business  
**3719 CORPOREX PARK DRIVE  
400  
TAMPA, FL 33619**

Mailing Address  
**3719 CORPOREX PARK DRIVE  
400  
TAMPA, FL 33619**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01252006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**30-0028693**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LANDWIRTH, GREGORY  
15328 WINDING CREEK DR.  
TAMPA, FL 33613**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete  
**O  
LANDWIRTH, GREGORY D  
15328 WINDING CREEK NORTH  
TAMPA, FL 33613**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition  
**SEE ATTACHED**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete  
**O  
HOUSE, SUE M  
P.O. BOX 34073  
TAMPA, FL 33694**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete  
**O  
DAVEY, GWYNN  
1501 N. WESTSHORE BLVD, SUITE 850  
TAMPA, FL 33607**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete  
**O  
HEINEKEN, BARBARA  
4010 W. SPRUCE STREET  
TAMPA, FL 33607**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete  
**D  
LLOYD, JASON  
401 E. JACKSON STREET, 20TH FLOOR  
TAMPA, FL 33062**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete  
**D  
NEIL, COREY  
P.O. BOX ONE  
TAMPA, FL 33601**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Greg Landwirth* **Greg Landwirth** 2/21/06 813-620-2949

Honorary Board  
MaryEllen Elia, Superintendent, Hills. County Public Schools  
Honorable Pam Iorio, Mayor, City of Tampa  
Don Wallace, LazyDays RV Supercenter

## A Gift For Teaching of Tampa

Helping students in need...



ATTACHMENT

40024000

#1102000800724

## BOARD OF DIRECTORS

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