

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004186

FILED  
Apr 29, 2005  
Secretary of State

**Entity Name:** FLORIDA MOTION PICTURE & TELEVISION ASSOCIATION - TAMPA BAY CHAPTER, INC.

**Current Principal Place of Business:**

888 EXECUTIVE CENTER DR. W.  
101  
ST. PETERSBURG, FL 33702

**New Principal Place of Business:**

**Current Mailing Address:**

888 EXECUTIVE CENTER DR. W.  
101  
ST. PETERSBURG, FL 33702

**New Mailing Address:**

**FEI Number:** 54-2111219

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WATERS, JAMES P  
888 EXECUTIVE CENTER DR. W.  
101  
ST. PETERSBURG, FL 33702 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: PD ( ) Delete  
Name: JOHNSON, DALE  
Address: P.O. BOX 23421  
City-St-Zip: TAMPA, FL 33623

Title: DV ( ) Delete  
Name: FENTON, NANETTE  
Address: P.O. BOX 23421  
City-St-Zip: TAMPA, FL 33623

Title: EVP ( ) Delete  
Name: ALAN, JERRY  
Address: P.O. BOX 23421  
City-St-Zip: TAMPA, FL 33623

Title: TD ( ) Delete  
Name: WATERS, JIM  
Address: P.O. BOX 23421  
City-St-Zip: TAMPA, FL 33623

Title: S ( ) Delete  
Name: GOODSPEED, MIRIAM  
Address: P.O. BOX 23421  
City-St-Zip: TAMPA, FL 33623

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: DV (X) Change ( ) Addition  
Name: GOODSPEED, MIRIAM  
Address: P.O. BOX 23421  
City-St-Zip: TAMPA, FL 33623

Title: EVP (X) Change ( ) Addition  
Name: FERRARA, FELICIA  
Address: P.O. BOX 23421  
City-St-Zip: TAMPA, FL 33623

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

Title: S (X) Change ( ) Addition  
Name: SHIPMAN, CHRISTINA  
Address: P.O. BOX 23421  
City-St-Zip: TAMPA, FL 33623

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: JAMES WATERS

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04/29/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date