

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004764

FILED
Apr 29, 2005
Secretary of State

Entity Name: BAYSHORE PATRIOTS, INC.

Current Principal Place of Business:

PO BOX 10365
TAMPA, FL 336790365

New Principal Place of Business:

Current Mailing Address:

PO BOX 10365
TAMPA, FL 336790365

New Mailing Address:

FEI Number: 01-0728223

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIORDANO, JOHN N ESQ
220 S FRANKLIN ST
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: DP () Delete
Name: WHITNEY, JULIE A
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: D () Delete
Name: STEFANY, DARRELL
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: D () Delete
Name: LAND, TONY
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: DS () Delete
Name: FEHRING, BIANCA
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: DV () Delete
Name: HAMBLIN, BILL
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: DT () Delete
Name: LIFSEY, JANNI
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WHITNEY, JULIE A
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: D (X) Change () Addition
Name: ROBERTS, FLORENCE
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: DS (X) Change () Addition
Name: CALLAHAN, PAULA
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: DP (X) Change () Addition
Name: FEHRING, BIANCA
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: D (X) Change () Addition
Name: HAMBLIN, BILL
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

Title: D (X) Change () Addition
Name: LIFSEY, JANNI
Address: PO BOX 10365
City-St-Zip: TAMPA, FL 336790365

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: BIANCA WEST-FEHRING

DP

04/29/2005

Electronic Signature of Signing Officer or Director

Date