

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005556

FILED
Jan 17, 2005
Secretary of State

Entity Name: UPPER TAMPA BAY LIBRARY FOUNDATION, INC.

Current Principal Place of Business:

12306 WYCLIFF PLACE
TAMPA, FL 336262632

New Principal Place of Business:

Current Mailing Address:

12306 WYCLIFF PLACE
TAMPA, FL 336262632

New Mailing Address:

FEI Number: 03-0411108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SCHARRINGHAUSEN, BRETT T
12306 WYCLIFF PLACE
TAMPA, FL 336262632 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: SCHARRINGHAUSEN, BRETT T
Address: 12306 WYCLIFF PLACE
City-St-Zip: TAMPA, FL 336262632

Title: D () Delete
Name: GURSKY, DAVID M
Address: 12733 TAR FLOER DRIVE
City-St-Zip: WESTCHASE, FL 33626

Title: D () Delete
Name: BOMAR, KRISTI
Address: 10508 ROCHESTER WAY
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: CARRIGAN, TOM
Address: 11282 W. HILLSBOROUGH
City-St-Zip: TAMPA, FL 33635

Title: D () Delete
Name: FERRENTINO, DAVID
Address: 15810 MUIRFIELD DR
City-St-Zip: ODESSA, FL 33556

Title: () Delete
Name:
Address:
City-St-Zip:

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: D () Change (X) Addition
Name: GURSKY, MARIA
Address: 12733 TAR FLOWER DR
City-St-Zip: TAMPA, FL 33626

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: DAVID M. GURSKY

DMG

01/17/2005

Electronic Signature of Signing Officer or Director

Date