2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N02000005556 02-08-2006 90007 045 ****61.25 UPPER TAMPA BAY LIBRARY FOUNDATION, INC. Principal Place of Business Mailing Address 12306 WYCLIFF PLACE 12306 WYCLIFF PLACE TAMPA, FL 33626-2632 TAMPA, FL 33626-2632 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02052006 Chg-NP CR2E037 (11/05) 4. FEI Number 03-0411108 City & State City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCHARRINGHAUSEN, BRETT T 12306 WYCLIFF PLACE Street Address (P.O. Box Number is Not Acceptable) TAMPA, FL 33626-2632 City 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 (NOTE: Registered Agent eignature required when rematating) DATE 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. ☐ Delete ☐ Change 🔀 Addition TITLE TITLE McGoye, Rebecca C SCHARRINGHAUSEN, BRETT T NAME 11829 Derbyshire DR 12306 WYCLIFF PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA, FL 336262632 CITY-ST-ZIP Tamph, FL 33626 Colete TITS F ☐ Change 52 Addition mcGoye, Paul J 11829 Derbyshine Dr GURSKY, DAVID M NAME NAME STREET ADDRESS 12733 TAR FLOER DRIVE STREET ADDRESS CITY-ST-ZIP WESTCHASE, FL 33626 CITY-ST-ZIP Tampa, FL 33626 TITLE ☐ Delete TITLE Ortiz-Sousa, Maria Addition BOMAR, KRISTI NAME NAME 12011 Oaksbury Dr STREET ADDRESS 10508 ROCHESTER WAY STREET ADDRESS CITY-ST-ZIP **TAMPA, FL 33626** CITY-ST-ZIP Tampa, FL 33626 Delete IIII F ☐ Change **Addition** Zabrek, Scott CARRIGAN, TOM MAME NAME 4533 Castaway DR. Stel STREET ADDRESS 11282 W. HILLSBOROUGH STREET ADDRESS Tampa, FL 33615 CITY-ST-7IP **TAMPA, FL 33635** CITY-ST-ZIP TITLE Oelete TILE Change ☐ Addition FERRENTINO, DAVID NUME NAME 15810 MUIRFIELD DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ODESSA, FL 33556 CITY-ST-ZIP **B** Delete ☐ Change ■ Addition GURSKY, MARIA HAME HAME STREET ADDRESS 12733 TAR FLOWER DR STREET ADDRESS **TAMPA. FL 33626** CITY-ST-ZIP 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-epitalytike empowered.

OFFICER OR DIRECTOR

FILED

Feb 08, 2006 8:00 am