

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009547

FILED  
Apr 29, 2005  
Secretary of State

**Entity Name:** THE TEXT AND ACADEMIC AUTHORS ASSOCIATION FOUNDATION, INC.

**Current Principal Place of Business:**

9313 42ND STREET NORTH  
PINELLAS PARK, FL 33782

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 76477  
ST. PETERSBURG, FL 33734

**New Mailing Address:**

**FEI Number:** 33-1038509

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PYNN, RONALD E  
9313 42ND STREET  
PINELLAS PARK, FL 33782 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: DV ( ) Delete  
Name: SULLIVAN, MICHAEL  
Address: 9529 TRIPP  
City-St-Zip: OAK LAWN, IL 60453

Title: DP ( ) Delete  
Name: LENNIE, MICHAEL  
Address: SYMPHONY TOWERS BLDG 750 B ST STE 2500  
City-St-Zip: SAN DIEGO, CA 92101

Title: D ( ) Delete  
Name: MOUNTAIN, LEE  
Address: 4 LEAF TOWN CONDOS 5110 SAN FELIPE #107-W  
City-St-Zip: HOUSTON, TX 77056

Title: DS ( ) Delete  
Name: PYNN, RONALD E  
Address: 3001 58TH AVE SOUTH APT. 1101  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: D ( ) Delete  
Name: MCKEAGUE, PAT  
Address: 1026 CHORRO STE 3  
City-St-Zip: SAN LUIS OBISPO, CA 93401

Title: DT ( ) Delete  
Name: WAKEFIELD, JOHN  
Address: UNISTY. OF N ALABAMA BOX 5208  
City-St-Zip: FLORENCE, AL 35632

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

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

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

Title: D (X) Change ( ) Addition  
Name: GILLEN, STEVE  
Address: 2800 CHEMED CENTER, 255 E.FIFTH ST.  
City-St-Zip: CINCINNATI, OH 45202

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

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

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

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: RONALD E. PYNN

DS

04/29/2005

Electronic Signature of Signing Officer or Director

Date