

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009954

FILED
Apr 27, 2005
Secretary of State

Entity Name: TAMPA-ST. PETERSBURG - SARASOTA MARKETING ASSOCIATION, INC

Current Principal Place of Business:

2624 SOUTH FAULKENBURG RD.
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

2624 SOUTH FAULKENBURG RD.
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 01-0758179

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUNTER, PAUL P
5814 DORY WAY
TAMPA, FL 33615 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: PRES () Delete
Name: ORCHARD, JAMES
Address: 4320 CARROLLWOOD VILLAGE DR
City-St-Zip: TAMPA, FL 33624

Title: VP () Delete
Name: SCHAEFER, STEVEN
Address: 10130 DOUGLAS OAKS CIRCLE #101
City-St-Zip: TAMPA, FL 33610

Title: SECT () Delete
Name: TEREFINO, JOANNE
Address: 7793 CASTLE ISLAND DR.
City-St-Zip: SARASOTA, FL 34240

Title: TRES () Delete
Name: HUNTER, PAUL
Address: 5814 DORY WAY
City-St-Zip: TAMPA, FL 33615

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FLY, RON
Address: 901 SOUTH FRANKLAND ROAD
City-St-Zip: TAMPA, FL 33629

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: PAUL HUNTER

TRES

04/27/2005

Electronic Signature of Signing Officer or Director

Date