2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000544

CURTISS, DEBRA

TAMPA, FL 33634

9417 CORPORATE LAKE DRIVE

Name:

Address: City-St-Zip:

Entity Name: TAMPA BAY TECHNOLOGY FORUM INC.

FILED Apr 13, 2005 Secretary of State

Littly Nai	ile. TAMIFAL	AT TECHNOLOGI FOROW, I	INC.				
Current Principal Place of Business:				New Principal Place of Business:			
3111 W. D SUITE 360 TAMPA, FI		JTHER KING JR. BLVD					
Current Mailing Address:				New Mailing Address:			
PO BOX 20 TAMPA, FI	0067 _ 336220067						
FEI Number:	51-0444271	FEI Number Applied For ()	FEI Num	ber Not App	licable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:		Name and	Address of	New Registered Agent:	
BAUER, MICHELLE 3111 W. DR. MARTIN LUTHER KING JR. BLVD SUITE 360 TAMPA, FL 33607 US				RYBICKI, JACK 3111 W. DR. MARTIN LUTHER KING JR. BLVD SUITE 360 TAMPA, FL 33607 US			
	named entity : of Florida.	submits this statement for the p	ourpose of	changing i	ts registered	office or registered agent, or bot	th,
SIGNATURE: JACK RYBICKI						04/13/2005	
	Electror	ic Signature of Registered Age	ent			Date	_
OFFICERS AND DIRECTORS:				ADDITION	IS/CHANGES	TO OFFICERS AND DIRECT	ORS:
Title: Name: Address: City-St-Zip:	BAUER, MICHE	LK JR. BLVD, SUITE 360		Title: Name: Address: City-St-Zip:	HAFER, ANDR	MLK JR. BLVD, SUITE 360	
Title: Name: Address: City-St-Zip:	GORDON, GEO	RUN AVENUE, SUITE 800		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	DIBENEDETTO	HORE BLVD, SUITE 800		Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	e: RYBICKI, JACK ess: 4890 W. KENNEDY BLVD, SUITE 110			Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title:	D ()	Delete		Title:	() Change () Addition	

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JACK RYBICKI D 04/13/2005