

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002587

FILED  
Aug 03, 2007  
Secretary of State

**Entity Name:** YE MYSTIC KREWE OF THE NAUTILUS TAMPA BAY, INC.

**Current Principal Place of Business:**

10115 SOMERSBY DRIVE  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 22062  
TAMPA, FL 33622

**New Mailing Address:**

FEI Number: 20-0084232      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SCHILLIG, LESLIE G  
10115 SOMERSBY DRIVE  
RIVERVIEW, FL 33569      US

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

SCHILLIG, LESLIE G  
10115 SOMERSBY DRIVE  
RIVERVIEW, FL 33578      US

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: LESLIE SCHILLIG

08/03/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: PATEL, MINESH I  
Address: 27835 SUMMER PLACE DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: VD      ( ) Delete  
Name: SCHILLIG, LESLIE  
Address: 10115 SOMERSBY DR.  
City-St-Zip: RIVERVIEW, FL 33569

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

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

Title: VD      (X) Change ( ) Addition  
Name: SCHILLIG, LESLIE  
Address: 10115 SOMERSBY DR.  
City-St-Zip: RIVERVIEW, FL 33578

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LESLIE SCHILLIG

V

08/03/2007

Electronic Signature of Signing Officer or Director

Date