

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001285

FILED
May 01, 2006
Secretary of State

Entity Name: WEDDING AND EVENT PROFESSIONALS OF TAMPA BAY, INC.

Current Principal Place of Business:

PO BOX 2092
PALM HARBOR, FL 346832092

New Principal Place of Business:

Current Mailing Address:

PO BOX 2092
PALM HARBOR, FL 346832092

New Mailing Address:

FEI Number: 34-1996455 **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:

SIMPSON, LAURIE
969 VIRGINIA AVE.
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

SHAW, RALPH D III
3044 GLEN OAK AVE.
CLEARWATER, FL 33759 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: RALPH D. SHAW III

05/01/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: VAN ETEN, DOUGLAS
Address: 7333 JASMIN DRIVE
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VP () Delete
Name: VERHAGE, SHARON
Address: 795 COUNTY ROAD 1 #186
City-St-Zip: PALM HARBOR, FL 34683

Title: SEC () Delete
Name: SIMPSON, LAURIE L
Address: 969 VIRGINIA AVENUE
City-St-Zip: PALM HARBOR, FL 34668

Title: TREA () Delete
Name: SHAW, DOUGLAS
Address: 3044 GLEN OAK AVENUE
City-St-Zip: CLEARWATER, FL 33759

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TREA (X) Change () Addition
Name: SHAW, RALPH D III
Address: 3044 GLEN OAK AVENUE
City-St-Zip: CLEARWATER, FL 33759

I hereby certify that the information supplied with this filing does not qualify for the 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: RALPH D. SHAW III

TRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date