

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000001949

FILED
May 26, 2006
Secretary of State

Entity Name: THE WALK OF TAMPA BAY, INC.

Current Principal Place of Business:

8927 DELTA LANE
TAMPA, FL 33635

New Principal Place of Business:

Current Mailing Address:

8927 DELTA LANE
TAMPA, FL 33635

New Mailing Address:

FEI Number: 20-0840632

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOFFETT, LISA M
8927 DELTA LANE
TAMPA, FL 33635 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: LISA MOFFETT

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MOFFETT, LISA M
Address: 8927 DELTA LANE
City-St-Zip: TAMPA, FL 33635

Title: DV () Delete
Name: CARPINTIER, DONALD J JR
Address: 8927 DELTA LANE
City-St-Zip: TAMPA, FL 33635

Title: D () Delete
Name: ESPEREDY, KATHLEEN J
Address: 15147 PLANTATION OAKS DR #8
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DV (X) Change () Addition
Name: WOLFE, LISA
Address: 8927 DELTA LANE
City-St-Zip: TAMPA, FL 33635

Title: DV (X) Change () Addition
Name: MCKEON, JEWEL
Address: 217 BAILEY ST
City-St-Zip: SAFETY HARBOR, FL 34695

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: LISA MOFFETT

DP

05/26/2006

Electronic Signature of Signing Officer or Director

Date