

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003334

FILED  
Jul 01, 2005  
Secretary of State

Entity Name: WEST TAMPA YELLOW JACKETS INC.

## Current Principal Place of Business:

8870 N HIMES AVE #216  
TAMPA, FL 33614

## New Principal Place of Business:

## Current Mailing Address:

8870 N HIMES AVE #216  
TAMPA, FL 33614

## New Mailing Address:

FEI Number: 34-1988312      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:

MCMILLIAN, CEDRIC  
5618 PENNACLE HGTS CIR #204  
TAMPA, FL 33624      US

## Name and Address of New Registered Agent:

MCMILLIAN, CEDRIC  
6505 YORKSHIRE CT # 323  
TAMPA, FL 33614      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: \_\_\_\_\_

07/01/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D      ( ) Delete  
Name: MCMILLIAN, CARY  
Address: 6505 YORKSHIRE CT #323  
City-St-Zip: TAMPA, FL 33614

Title: D      ( ) Delete  
Name: MCMILLIAN, CEDRIC  
Address: 5618 PINNACLE HGTS CIR #204  
City-St-Zip: TAMPA, FL 33624

Title: D      ( ) Delete  
Name: STONE, ANTONIO  
Address: 402 SANGRIA DR  
City-St-Zip: VALRICO, FL 33594

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP      (X) Change ( ) Addition  
Name: MCMILLIAN, CARY  
Address: 6505 YORKSHIRE CT #323  
City-St-Zip: TAMPA, FL 33614

Title: P      (X) Change ( ) Addition  
Name: MCMILLIAN, CEDRIC  
Address: 6505 YORKSHIRE CT #323  
City-St-Zip: TAMPA, FL 33614

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: CEDRIC MCMILLIAN

P

07/01/2005

Electronic Signature of Signing Officer or Director

Date