

4/13

FILED
Jun 07, 2005 8:00 am
Secretary of State

04-13-2005 90059 005 ****61.25

**2005 NOT-FOR-PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # N04000008413			
1. Entity Name GREATER PALM RIVER COMMUNITY CIVIC ASSOCIATION, INC.			
Principal Place of Business 1412 MAYDELL DR. TAMPA, FL 33619-4551		Mailing Address 1412 MAYDELL DR. TAMPA, FL 33619-4551	
2. Principal Place of Business		3. Mailing Address	
Subs. Apr. #, etc.		Subs. Apr. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent DAVIS, M. JOAN 1607 MAYDELL DR. TAMPA, FL 33619-4551		5. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
6. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title is acceptable. (NOTE: Registered Agent signature required upon reissuance.)			
Filing Fee is \$41.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Brad Monroe 509 S. 54th St Tampa FL 33619	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Jennifer Wright 910 Maydell Dr Tampa FL 33619
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Robert Thomas 5711 20th St Tampa FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President - Community Relations Dottie Tilden 1412 Maydell Dr Public Tampa, FL 33619	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President - Communications Katreen Daleour 5513 Hammond Dr Tampa	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director At Large Mark Lindstrom 6002 G Bockwright Dr Tampa FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Joan Davis 1607 Maydell Dr Tampa FL 33619	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>D. Tilden</i>		4-11-05 813 626 7066	

*VP Public
 Relations*