2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State
04-13-2006 90279 026 ****61.25

DOCUMENT # N04580

1. Entity Name
MAHAFFEY THEATER FOUNDATION AT THE BAYFRONT CENTER, INC.

Principal Place of Business	Mailing Address
400 1ST STREET SOUTH ST PETERSBURG, FL 33701 US	400 1ST STREET SOUTH ST PETERSBURG, FL 33701 US

04062006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	PO Box 353 Suite, Apt. #, etc.
City & State	City & State: St. Petersburg, FL
Zip / Country	Zip: 33731 Country: USA

4. FEI Number 59-2446773 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KAPUSTA, ROBERT JR
100 SECOND AVE S.
#701
SAINT PETERSBURG, FL 33704

7. Name and Address of New Registered Agent

Name: Correct Spelling to Kapusta
Street Address (P.O. Box Number is Not Acceptable):
City: **FL** Zip Code:

8. 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 if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2006

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	FVT MOREHEAD, ROBERT D 960 WATER LILY CT. NE SAINT PETERSBURG, FL 33703	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TT Richard Freeburg #810 1 Beach Dr. SE St. Petersburg, FL 33701 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2VT BROWN, MICHAEL A 15843 REDINGTON DR REDINGTON BEACH, FL 33708	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	FVT H. William Heller 960 Water Lily Ct. NE St. Petersburg, FL 33703 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST HENRY, SUSAN L 2506 ROCKY POINTE # 337 TAMPA, FL 33607	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST Mirella C. Smith 600 55th Avenue St. Pete Beach, FL 33706 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PT KAPUSTA, ROBERT JR 1410 45TH AVENUE N ST. PETERSBURG, FL 33703	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T CAMEJO, EDUARDO 1725 BEACH DRIVE NE ST PETERSBURG, FL 33704	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~T~~ BURNS, ROBERT 200 CENTRAL AVE # 1300 SAINT PETERSBURG, FL 33701	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	2VT ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____ Robert Kapusta, Jr. 4/7/2006 727-820-9857
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #