

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011949

FILED
Mar 21, 2006
Secretary of State

Entity Name: THE PAUL MOORE FOUNDATION, INC.

Current Principal Place of Business:

5904 N ARMENIA AVE
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

5904 N ARMENIA AVE
TAMPA, FL 33603

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BELL, JAMES L
5904 N ARMENIA AVE
TAMPA, FL 33603 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: WATERS, JACK
Address: 5904 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33603

Title: T () Delete
Name: DENOME, SAM
Address: 5904 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33603

Title: T () Delete
Name: PETSCHOW, ROBERT
Address: 5904 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33603

Title: T () Delete
Name: SLOAN, KELLY
Address: 5904 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33603

Title: T () Delete
Name: O'STEEN, STEVE
Address: 5904 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SLOAN, KELLY
Address: 9918 ALAVISTA DRIVE
City-St-Zip: GIBSONTOWN, FL 33534

Title: V (X) Change () Addition
Name: PETSCHOW, ROBERT
Address: 1701 20TH AVENUE
City-St-Zip: ST. PETERSBURG, FL 33713

Title: TS (X) Change () Addition
Name: O'STEEN, STEVE
Address: 1210 TUXFORD DRIVE
City-St-Zip: BRANDON, FL 33511

Title: TR (X) Change () Addition
Name: DENOME, SAMUEL
Address: 3008 LAKE ELLEN DRIVE
City-St-Zip: TAMPA, FL 33618

Title: TR (X) Change () Addition
Name: WATERS, JACK
Address: 708 W HILDA STREET
City-St-Zip: TAMPA, FL 33603

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: KELLY SLOAN

P

03/21/2006

Electronic Signature of Signing Officer or Director

Date