

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05587

FILED
Apr 29, 2005
Secretary of State

Entity Name: INDEPENDENT COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

C/O BEATRICE SPEARMAN
418 E EMILY STREET
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

418 E EMILY ST.
TAMPA, FL 33603 US

New Mailing Address:

FEI Number: 59-2458420

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPEARMAN, BEATRICE W.
2420 E. EMMA STREET
TAMPA, FL 33610 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: PTD () Delete
Name: SPEARMAN, BEATRICE W.,
Address: 2420 E EMMA
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: SPEARMAN, LINDA M
Address: 1908 19TH AVENUE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: SPEARMAN RICHARD E.,
Address: 1908 19TH AVE.
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: BEATRICE W. SPEARMAN,

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date