

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90028 044 ****70.00

DOCUMENT # N09357

1. Entity Name

TAMPA COLLEGE ALUMNI ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2471 MCMULLEN-BOOTH ROAD
 CLEARWATER FL 33759
 US

2471 MCMULLEN-BOOTH ROAD
 CLEARWATER FL 33759-1354
 US

2. Principal Place of Business

2471 McMullen Booth Rd
 Suite, Apt. #, etc.

3. Mailing Address

2471 McMullen Booth Rd.
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Clearwater, FL

City & State

Clearwater, FL

4. FEI Number

59-2515592

Applied For

Not Applicable

Zip

33759

Country

US

Zip

33759

Country

US

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

WEIGAND, TERESA
 2471 MCMULLEN-BOOTH ROAD
 CLEARWATER FL 33759

7. Name and Address of New Registered Agent

Name

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☒ PD ☐ Delete
 NAME COLE, JUDY
 STREET ADDRESS 1408 MURRAY AVENUE
 CITY-ST-ZIP CLEARWATER FL 33755

TITLE ☒ PD ☐ Delete
 NAME WEIGAND, TERESA L.
 STREET ADDRESS 11201 122 AVE N #119-B
 CITY-ST-ZIP LARGO FL 33778

TITLE ☒ PD ☐ Delete
 NAME KENNEDY, LINDA
 STREET ADDRESS 1702 IRONWOOD CT E.
 CITY-ST-ZIP OLDSMAR FL 34677

TITLE ☒ D ☒ Delete
 NAME WILEY, ROBERT
 STREET ADDRESS 3603 50TH AVE N.
 CITY-ST-ZIP ST PETE FL 33714

TITLE ☒ PD ☒ Delete
 NAME GOULD, PEGGY
 STREET ADDRESS 1412 PINEAPPLE LANE
 CITY-ST-ZIP CLEARWATER FL 34619

TITLE ☒ VP ☐ Delete
 NAME Amy Weigand
 STREET ADDRESS 159 S Marshall St.
 CITY-ST-ZIP Safety Harbor, FL 34695

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ D ☐ Change ☒ Addition
 NAME Donald Hamilton
 STREET ADDRESS 924 Wicks Dr
 CITY-ST-ZIP Palm Harbor, FL 34684

TITLE ☐ D ☐ Change ☒ Addition
 NAME Daniel Moore
 STREET ADDRESS 4443 Saddleworth Circle
 CITY-ST-ZIP Orlando, FL 32826

TITLE ☐ D ☐ Change ☒ Addition
 NAME Marshall Green
 STREET ADDRESS 2635 Seville Blvd. #309
 CITY-ST-ZIP Clearwater, FL 33764

TITLE ☐ D ☐ Change ☒ Addition
 NAME Audrey Henry
 STREET ADDRESS 11285 S 66 Ter H.
 CITY-ST-ZIP Seminole, FL 33772

TITLE ☐ D ☐ Change ☒ Addition
 NAME Tia Bennett
 STREET ADDRESS 2259 Spanish Vista Drive
 CITY-ST-ZIP Palm Harbor, FL 34683

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE REQUIRED

7/12/00

25-2687
 727-511-7989