

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09553

FILED  
Apr 30, 2006  
Secretary of State

**Entity Name:** HILLSBOROUGH COUNTY HOTEL & MOTEL ASSOCIATION, INC.

**Current Principal Place of Business:**

109 N. BRUSH ST.  
SUITE 400  
TAMPA, FL 33602 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 3298  
TAMPA, FL 33602 US

**New Mailing Address:**

**FEI Number:** 59-1732091

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

MORRISON, BOB  
109 N. BRUSH ST.  
SUITE 400  
TAMPA, FL 33602 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: ED ( ) Delete  
Name: MORRISON, BOB,  
Address: 109 N. BRUSH ST. SUITE 400  
City-St-Zip: TAMPA, FL 33602 US

Title: P/D ( ) Delete  
Name: BUCHOLTZ, ED  
Address: TWO TAMPA CITY CENTER  
City-St-Zip: TAMPA, FL 33602

Title: D ( ) Delete  
Name: COLLIER, JOE  
Address: 5108 EISENHOWER BLVD.  
City-St-Zip: TAMPA, FL 33634

Title: VP/D ( ) Delete  
Name: ALICANDRO, RON  
Address: EMBASSY STE, 555 N. W.SHORE BLVD  
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete  
Name: SCOTT, MARY  
Address: TAMPA MARRIOTT WATERSIDE  
City-St-Zip: TAMPA, FL 33602

Title: ST/D ( ) Delete  
Name: CLOUGH, JEFF  
Address: SADDLEBROOK RESORT & SPA  
City-St-Zip: WESLEY CHAPEL, FL 33543

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: D (X) Change ( ) Addition  
Name: BEECHAM, DAVID  
Address: TWO TAMPA CITY CENTER  
City-St-Zip: TAMPA, FL 33602

Title: P/D (X) Change ( ) Addition  
Name: COLLIER, JOE  
Address: 5108 EISENHOWER BLVD.  
City-St-Zip: TAMPA, FL 33634

Title: VP/D (X) Change ( ) Addition  
Name: BARTHOLOMAY, JIM  
Address: RENAISSANCE TAMPA, 4200 JIM WALTER BLVD.  
City-St-Zip: TAMPA, FL 33609

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 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: BOB MORRISON

ED

04/30/2006

Electronic Signature of Signing Officer or Director

Date