


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

Feb 02, 2005 08:00 AM
Secretary of State

DOCUMENT # N12428 1. Entity Name WILLIAMSBURG/TAMPA BAY MANAGEMENT CORPORATION	
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Principal Place of Business 28429 WILLIAMSBURG DRIVE WESLEY CHAPEL, FL 33543 US	Mailing Address 28429 WILLIAMSBURG DRIVE WESLEY CHAPEL, FL 33543 US
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01152005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2619374	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent KARP, RONALD 28318 TANGLEWOOD DR WESLEY CHAPEL, FL 33543

**DO NOT WRITE
IN THIS SPACE**

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 <u>Ronald Karp</u> RONALD KARP <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE <u>1/21/05</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KARP, RONALD 28318 TANGLEWOOD DR WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MOSKOWITZ, ART 28538 TWINBROOK LA WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KRVPA, LAURIE 28353 TANGLEWOOD DR WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HURD, SHERILL 1852 TUPELO LA WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALLEY, RICHARD 28315 TANGLEWOOD DR WESLEY CHAPEL, FL 33543
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZEHNDER, JAMES 28709 TANNER DR WESLEY CHAPEL, FL 33543

**DO NOT WRITE
IN THIS SPACE**

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02/02/05-80125-010 61.25

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: <u>Ronald Karp</u> RONALD KARP <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE <u>1/21/05</u> 813 973 2920 <small>Daytime Phone #</small>