



2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2006 8:00 am
Secretary of State

02-13-2006 90007 045 ****61.25

DOCUMENT # N12428 1. Entity Name WILLIAMSBURG/TAMPA BAY MANAGEMENT CORPORATION					
Principal Place of Business 28429 WILLIAMSBURG DRIVE WESLEY CHAPEL, FL 33543 US			Mailing Address 28429 WILLIAMSBURG DRIVE WESLEY CHAPEL, FL 33543 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 59-2619374 Applied For <input type="checkbox"/> Not Applicable	
Country		Country		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				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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KARP, RONALD 28318 TANGLEWOOD DR WESLEY CHAPEL, FL 33543	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MOSKOWITZ, ART 28538 TWINBROOK LA WESLEY CHAPEL, FL 33543	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RICHARD ALLEY 28315 TANGLEWOOD DR WESLEY CHAPEL FL. 33543	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T KRVPA, LAURIE 28353 TANGLEWOOD DR WESLEY CHAPEL, FL 33543	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HURD, SHERILL 1852 TUPELO LA WESLEY CHAPEL, FL 33543	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DONNA BELL 1954 TAMPA BAY DR WESLEY CHAPEL FL. 33543	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALLEY, RICHARD 28315 TANGLEWOOD DR WESLEY CHAPEL, FL 33543	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENNETH KILLEBREW 28262 TANGLEWOOD DR WESLEY CHAPEL FL. 33543	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZEHNDER, JAMES 28709 TANNER DR WESLEY CHAPEL, FL 33543	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>Ronald Karp</i> RONALD KARP <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			V30/06 813 973 2920 <small>Date Daytime Phone #</small>		