

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16055

FILED  
May 02, 2005  
Secretary of State

**Entity Name:** SHOPPING CENTERS POLITICAL ACTION COMMITTEE, INC.

**Current Principal Place of Business:**

311 E PARK AVENUE  
TALLAHASSEE, FL 323017736

**New Principal Place of Business:**

**Current Mailing Address:**

311 E PARK AVENUE  
TALLAHASSEE, FL 323017736

**New Mailing Address:**

**FEI Number:** 59-2781238      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

MYERS, JULIE S  
311 E PARK AVENUE  
TALLAHASSEE, FL 32312      US

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: VD      ( ) Delete  
Name: LECKY, JAMES,  
Address: 311 E. PARK AVENUE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: T      ( ) Delete  
Name: MYERS, JULIE  
Address: 311 EAST PARK AVE.  
City-St-Zip: TALLAHASSEE, FL

Title: PD      ( ) Delete  
Name: RIVERA OSCAR,  
Address: 311 E. PARK AVENUE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: VD      ( ) Delete  
Name: BLASI, PATRICIA  
Address: 311 EPARK AVE  
City-St-Zip: TALLAHASSEE, FL 32301

Title: SEC      ( ) Delete  
Name: KESSEL, GREGORY  
Address: 311 E. PARK AVENUE  
City-St-Zip: TALLAHALLASSEE, FL 32301

Title: VD      ( ) Delete  
Name: MURPHY, SUE  
Address: 311 E. PARK AVENUE  
City-St-Zip: TALLAHASSEE, FL 32301

**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:

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: JULIE S. MYERS

T

05/02/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date