

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18036

FILED  
Apr 12, 2009  
Secretary of State

**Entity Name:** URBAN FINANCIAL SERVICES COALITION, INC. - TAMPA BAY

**Current Principal Place of Business:**

2105 N NEBRASKA AVENUE  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1915  
TAMPA, FL 33602

**New Mailing Address:**

**FEI Number:** 59-2825011

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STAMPS, S.M. DAVID III  
501 E KENNEDY BOULEVARD  
SUITE 1700  
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: DV ( ) Delete  
Name: CAMPBELL, NICOLE  
Address: 1500 S. DALE MABRY  
City-St-Zip: TAMPA, FL 33629

Title: D ( ) Delete  
Name: MANER, C. MACHELLE  
Address: 100 S. ASHLEY DR., STE 1000  
City-St-Zip: TAMPA, FL 33602

Title: TS ( ) Delete  
Name: WIMBERLY, FRANCES A  
Address: PO BOX 5152  
City-St-Zip: TAMPA, FL 33675

Title: V ( ) Delete  
Name: CARSWELL, ANTHONY  
Address: 101 E KENNEDY BLVD  
City-St-Zip: TAMPA, FL 33602

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: DP (X) Change ( ) Addition  
Name: WILLIAMS, CHARNELL  
Address: 3800 CITIGROUP CENTER, BLDG B, 3RD FL.  
City-St-Zip: TAMPA, FL 33610

Title: DS (X) Change ( ) Addition  
Name: MANER, C. MACHELLE  
Address: 100 S. ASHLEY DR., STE 1000  
City-St-Zip: TAMPA, FL 33602

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

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

Title: D ( ) Change (X) Addition  
Name: JENKINS-HOLMES, DANA  
Address: 3621 CYPRESS MEADOWS ROAD  
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information supplied with this filing does not qualify 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: FRANCES A WIMBERLY

TS

04/12/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date