

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20365

FILED
Feb 24, 2005
Secretary of State

Entity Name: TAMPA BAY CHAPTER OF THE SOCIETY OF FINANCIAL SERVICE PROFESSIONALS, INC.

Current Principal Place of Business:

4010 CYPRESS WILLOW CT
TAMPA, FL 33614 US

New Principal Place of Business:

Current Mailing Address:

C/O THOMAS A. ROMAN
P.O. BOX 21732
TAMPA, FL 33622 US

New Mailing Address:

FEI Number: 59-2824939

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORREMAN, ELAINE
4010 CYPRESS WILLOW CT
TAMPA, FL 33614 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: P () Delete
Name: BALKCOM, CAROL
Address: 302 KNIGHT RUN AVE., SUITE 100
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: GRIEB, ROBERT
Address: 500 N. WESTSHORE #700
City-St-Zip: TAMPA, FL 33609

Title: VP () Delete
Name: DRESSEL, JEFFREY
Address: 111 2ND AVE. NE
City-St-Zip: ST. PETERSBURG, FL 33701

Title: D () Delete
Name: COLEMAN, ROBERT
Address: 1511 N. WESTSHORE BLVD.
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: ALFORD, JAYNE
Address: 1511 N. WESTSHORE BLVD.
City-St-Zip: TAMPA, FL 33607

Title: VP () Delete
Name: THAXTON, DUFFY
Address: 2907 BAY TO BAY #102
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DRESSEL, JEFFREY
Address: 111 2ND AVE NE #911
City-St-Zip: ST. PETERSBURG, FL 33701

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

Title: VP (X) Change () Addition
Name: THAXTON, DUFFY
Address: 2907 BAY TO BAY BLVD #102
City-St-Zip: TAMPA, FL 33609

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

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

Title: D (X) Change () Addition
Name: BOSWELL, SUSAN
Address: 10006 N. DALE MABRY #113
City-St-Zip: TAMPA, FL 33618

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: ELAINE DORREMAN

SEC.

02/24/2005

Electronic Signature of Signing Officer or Director

Date