

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28685

FILED
May 01, 2006
Secretary of State

Entity Name: YBOR CITY DEVELOPMENT CORPORATION

Current Principal Place of Business:

2105 N NEBRASKA AVE
2ND FLOOR
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

2105 N NEBRASKA AVE
2ND FLOOR
TAMPA, FL 33602 US

New Mailing Address:

FEI Number: 59-2943697 **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:

HERNANDEZ, GIL
1715 N. WESTSHORE BLVD
TAMPA, FL 33607 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: CD () Delete
Name: KAHANA, ALAN
Address: PO BOX 5716
City-St-Zip: TAMPA, FL 33614

Title: SD () Delete
Name: SHIVER, JACK
Address: 1617 E. 8TH AVE
City-St-Zip: TAMPA, FL 33605

Title: TD () Delete
Name: HERNANDEZ, G.J.
Address: 1715 N. WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33607

Title: VD () Delete
Name: WAGNER, RACHELLE
Address: 931 E. 11TH AVE
City-St-Zip: TAMPA, FL 33605

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: G.J. HERNANDEZ

TD

05/01/2006

Electronic Signature of Signing Officer or Director

Date