2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29136

FILED Sep 06, 2006 Secretary of State

Entity Name: TAMPA EAST OWNERS' ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

ONE TAMPA CITY CENTER 207-D KELSEY LN **SUITE 2865** TAMPA, FL 33619

TAMPA, FL 33602

Current Mailing Address: New Mailing Address:

ONE TAMPA CITY CENTER 207-D KELSEY LN SUITE 2865 TAMPA, FL 33619

TAMPA, FL 33602

FEI Number: 59-2936614 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:

ROBY, DAVID A MARY, CRINO P ONE TAMPA CITY CENTER 207-D KELSEY LN US **SUITE 2865** TAMPA, FL 33619 TAMPA, FL 33602 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: MARY P. CRINO 09/06/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DP **PRES** () Delete (X) Change () Addition

ROBY, DAVID A Name: CRINO, MARY P Name: ONE TAMPA CITY CTR STE 2865 Address: 207 D KELSEY LN Address:

City-St-Zip: TAMPA, FL 33602 City-St-Zip: TAMPA, FL 33619

Title: () Delete Title: **TRES** (X) Change () Addition RENNER, MARCIA Name: EVANS, J. AARON Name:

Address: 4300 W CYPRESS Address: 207 D KELSEY LN City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33619

Title: DST () Delete Title: (X) Change () Addition CRINO, MARY RENNER, MARCIA Name: Name:

3000 BAYPORT DRIVE SUITE 100 Address:

Address: 207 D KELSEY LANE City-St-Zip: TAMPA, FL 33619 City-St-Zip: TAMPA, FL 33607

Title: (X) Delete Title: () Change () Addition

Name: BINDER, SANDRA L Name: ONE TAMPA CITY CENTER 2865 Address: Address: City-St-Zip: TAMPA, FL 33602 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: MARY P. CRINO **PRES** 09/06/2006