2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31708

US

Apr 29, 2004 Secretary of State

Entity Name: FLORIDA WEST COAST CHAPTER OF THE INSTITUTE OF INTERNAL AUDITORS, INCORPORATED

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

P O BOX 26483 **TAMPA, FL 33623**

Current Mailing Address: New Mailing Address:

P O BOX 26483 TAMPA, FL 33623 US

FEI Number: 59-2951576 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HANKINS, BETTY L 1515 N. WESTSHORE BLVD INTERNAL AUDIT DEPT. TAMPA, FL 33607

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition SHEER, MELINDA SHEER, MELINDA Name: Name: 1500 N. DALE MAERY HWY Address: 1500 N. DALE MABRY HWY Address: TAMPA, FL 33631 City-St-Zip: TAMPA, FL 33631 City-St-Zip:

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

SKIPPER, CYNDI Name: Name: HEAD, KATE

Address: 101 E KENNEDY BLVD STE 2200 Address: 4202 E. FOWLER AVE MHH 252

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

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

GLICKMAN, SUSAN Name: Name: 3109 W DR MLK BLVD Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip:

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

THROWER, MITCHELL Name: Name: WEATHERS, BILLY HILLS CO. AVIATION AUTH PO BOX 22287 TIA 2002 N. FLORIDA AVE. Address: Address: City-St-Zip: TAMPA, FL 33622 City-St-Zip: TAMPA, FL 33602

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

RATURI, REENA CUPPETT, STEVE Name: Name:

4202 E. FOWLER AVE MHH252 4202 E. FOWLER AVE MHH252 Address: Address:

City-St-Zip: TAMPA, FL 33620 City-St-Zip: TAMPA, FL 33620

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

GRIFFEY, RANDY Name: Name: Address: Address: 1515 N WESTSHORE BLVD TAMPA, FL 33607 City-St-Zip: 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: STEVE CUPPETT Т 04/29/2004