

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 24, 2004 8:00 am**  
**Secretary of State**

03-24-2004 90019 015 \*\*\*\*61.25

**44020501**



<b>DOCUMENT # N43608</b> 1. Entity Name <b>WORLD TRADE ASSOCIATION OF TAMPA BAY, INC.</b>					
Principal Place of Business <b>1101 CHANNELSIDE DRIVE TAMPA, FL 33602</b>			Mailing Address <b>1101 CHANNELSIDE DRIVE TAMPA, FL 33602</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-3092928</b>	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>BIERLEY, JOHN C 100 NORTH TAMPA STREET SUITE 2120 TAMPA, FL 33602</b>			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ <b>FL</b> Zip Code _____		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2004</b>		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>TONER, STEPHEN J VCOO</b> <b>4205 SALTWATER BLVD.</b> <b>TAMPA, FL 33615</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PCOO</b> <b>Toner, Stephen J.</b> <b>4205 Saltwater Blvd.</b> <b>Tampa, FL 33615</b>	
	<input checked="" type="checkbox"/> Delete			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CTR</b> <b>BRONSON, THAYER A</b> <b>401 E JACKSON ST #2310</b> <b>TAMPA, FL 33602</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CTR</b> <b>Thayer, A. Bronson</b> <b>2202 North Westshore Blvd. #150</b> <b>Tampa, FL 33607</b>	
	<input checked="" type="checkbox"/> Delete			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PTR</b> <b>PARKER, J. KENNETH</b> <b>1101 CHANNELSIDE DRIVE</b> <b>TAMPA, FL 33602</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TR</b> <b>Parker, J. Kenneth</b> <b>5148-31st Avenue South</b> <b>Gulfport, FL 33707</b>	
	<input checked="" type="checkbox"/> Delete			<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TR</b> <b>Samson, Bruce A.</b> <b>3203 Bayshore Blvd. #602</b> <b>Tampa, FL 33629</b>	
	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST</b> <b>Bierley, John C.</b> <b>5414 Lykes Lane</b> <b>Tampa, FL 33611</b>	
	<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <i>[Signature]</i> <b>Sec/Treas.</b> <i>[Signature]</i> <b>March 15, 2004</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					