2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003417

Entity Name: NEW TAMPA COMMUNITY COUNCIL, INC.

FILED Apr 11, 2007 Secretary of State

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

PO BOX 46775 8916 MAGNOLIA CHASE CIRCLE

TAMPA, FL 33647 TAMPA, FL 33647 US

Current Mailing Address: New Mailing Address:

PO BOX 46775 P. O. BOX 46775

TAMPA, FL 33647 US TAMPA, FL 33647 US

FEI Number: 59-3207454 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:

FAUGL, GEORGE C JR 8903 RÉGENTS PARK DR STE 110 TAMPA, FL 33647 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

MARGARELLA, FRANK SHELOR, DAVID Name: Name: 9405 WILLOW COVE COURT Address: 18127 PHEASANT WALK DR Address:

TAMPA, FL 33647

City-St-Zip: City-St-Zip: TAMPA, FL 33647

Title: () Delete Title: (X) Change () Addition YANEY, MARY ANN Name: YANEY, MARY ANN Name:

Address: 30643 NICKERSON LOOP Address: 1653 LEYBOURNE LOOP City-St-Zip: WESLEY CHAPEL, FL 33543 City-St-Zip: WESLEY CHAPEL, FL 33543

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

PALMER, MATTHEW PALMER, MATTHEW Name: Name: 4928 EBENSBURG DRIVE Address: Address: 4928 EBENSBURG DRIVE

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647

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

Name: WIENER, TODD Name: HAVILAND, RACHEL 14201 BRUCE B. DOWNS BLVD. #1 Address: Address: 10432 LUCAYA DR City-St-Zip: TAMPA, FL 33613 City-St-Zip: TAMP, FL 33647

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 ANN YANEY PD 04/11/2007