

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # N94000001952	
1. Entity Name TEMPLE CREST CIVIC CLUB, INC.	
Principal Place of Business 4242 E. MILLER AVE. TAMPA, FL 33617	Mailing Address 4242 E. MILLER AVE. TAMPA, FL 33617



01142005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3229689	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DENNIS, CAMELLA L
4221 S SANDALWOOD CIR
TAMPA, FL 33617

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHNSON, JEANNE 7507 LAKESHORE DR TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HOFFMAN, FRED 8707 EDNAM TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HOFFMAN, MISSY 8707 EDNAM TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CLARK, MICHELLE O 4821 REGNAS AVENUE TAMPA, FL 33617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRST WALLACE, VINCENT 7303 N HUTTON PL TAMPA, FL 33604
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRST SMITH, SARA 8702 ORANGEVILLE AVE TAMPA, FL 33617

U00000253356
03/07/05-80029-020 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNATURE:

Michelle O. Clark MICHELLE O. CLARK

Date

2-14-2005

Daytime Phone #

813 -
989-3552