

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90052 034 ****61.25

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1. Entity Name

TAMPA BAY FLORIDA UNIT WBCCI, INC.



Principal Place of Business

**6411 MORNAY DR
TAMPA FL 33615-3425
US**

Mailing Address

**6411 MORNAY DR
TAMPA FL 33615-3425
US**

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

59-6212215

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SHIRES, JANET
6411 MORNAY DR
TAMPA FL 33615-3425**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITILE NAME SHIRES, JANET ☐ Delete
STREET ADDRESS 6411 MORNAY DR
CITY-ST-ZIP TAMPA FL 33615-3425

TITILE NAME PP HERMAN, ROBERT ☒ Delete
STREET ADDRESS 2092 CULBREATH RD, #C-12
CITY-ST-ZIP BROOKSVILLE FL 34602

TITILE NAME P WALLEN, CAROL ☐ Delete
STREET ADDRESS 3449 TALLEY RIDGE DR
CITY-ST-ZIP THE VILLAGES FL 32162

TITILE NAME PE KELLER, DAVE ☐ Delete
STREET ADDRESS 1456 DOLPHIN ST
CITY-ST-ZIP NOKOMIS FL 34275

TITILE NAME D MCGEE, PAT ☒ Delete
STREET ADDRESS 6944 SOUTH SHORE DR S
CITY-ST-ZIP SOUTH PASADENA FL 33707

TITILE NAME D MCCOLLOUGH, JIM ☐ Delete
STREET ADDRESS 10000 US 98 N #603
CITY-ST-ZIP LAKELAND FL 33809

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITILE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITILE NAME Corr. SECRETARY. ☒ Change ☒ Addition
NAME Ruth Kirchenstiner
STREET ADDRESS 4914 Bradford Lane
CITY-ST-ZIP Tampa FL 33624

TITILE NAME Past President ☒ Change ☐ Addition
NAME Waller, Carol
STREET ADDRESS Same
CITY-ST-ZIP

TITILE NAME President ☒ Change ☐ Addition
NAME Dave Keller
STREET ADDRESS SAME
CITY-ST-ZIP

TITILE NAME DIRECTOR ☒ Change ☒ Addition
NAME DICK SMOLK
STREET ADDRESS 118 Robert James Dr
CITY-ST-ZIP Valrico, FL 33594

TITILE NAME President Elect ☒ Change ☐ Addition
NAME Jim McCollough
STREET ADDRESS Same
CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/29/04