

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000006047

FILED  
Jul 06, 2006  
Secretary of State

**Entity Name:** TAMPA AREA PROFESSIONAL PHOTOGRAPHERS ASSOCIATION, INC.

**Current Principal Place of Business:**

13910 N DALE MABRY HWY  
BLDG 4, SUITE 6  
TAMPA, FL 33618 US

**New Principal Place of Business:**

**Current Mailing Address:**

13910 N DALE MABRY HWY  
BLDG 4, SUITE 6  
TAMPA, FL 33618 US

**New Mailing Address:**

**FEI Number:** 59-3403867 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

NEWSOME, KEVIN  
13910 N DALE MABRY HWY  
BLDG 4, STE 6  
TAMPA, FL 33618 US

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

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:**

Title: S ( ) Delete  
Name: WARMOLTS, KIM  
Address: 997 APPALOOSA RD.  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: P ( ) Delete  
Name: ALCORN, DEBBIE  
Address: 4243 TROUT DR. S.E  
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: VP ( ) Delete  
Name: VALDES, PEPITO  
Address: 202 S LOIS AVE.  
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete  
Name: NEWSOME, KEVIN  
Address: 13910 N DALE MABRY HWY, BLDG4 STE 6  
City-St-Zip: TAMPA, FL 33618

Title: T ( ) Delete  
Name: SARGENT, ROBERT  
Address: 1906 N. ARMENIA AVE.  
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete  
Name: ALLISON, TERRY  
Address: 901 34TH ST S  
City-St-Zip: ST. PETERSBURG, FL 33711

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VP (X) Change ( ) Addition  
Name: WARMOLTS, KIM  
Address: 997 APPALOOSA RD.  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: DUNCAN, MICHELLE  
Address: 7108 CARYN BOBBI LANE  
City-St-Zip: DOVER, FL 33527

Title: S (X) Change ( ) Addition  
Name: WALKER, CAROL  
Address: 7925 4TH STREET NORTH  
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D (X) Change ( ) Addition  
Name: SARGENT, ROBERT  
Address: 1906 N. ARMENIA AVE.  
City-St-Zip: TAMPA, FL 33607

Title: D (X) Change ( ) Addition  
Name: GRECCO, RON  
Address: P.O. BOX 8263  
City-St-Zip: SEMINOLE, FL 33775

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: DEBBIE ALCORN

P

07/06/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date