2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N96000006404 03-03-2005 90176 036 ****61.25 TAMPA BAY CATAMARAN SAILORS, INC. Principal Place of Business Mailing Address % CHRISTINE TUTCHER % CHRISTINE TUTCHER 901 BELLE CHASE CIRCLE 901 BELLE CHASE CIRCLE TAMPA, FL 33634-6280 TAMPA, FL 33634-6280 2. Principal Place of Business 3. Mailing Address c/o CHRISTINE TUTCHER c/o CHRISTINE TUTCHER Suite, Apt. #, etc. 12703 COUNTRY BROOK LN Suite, Apt. #, etc. 12703 COUNTRY BROOK LN 02282005 Cha-NP CR2E037 (10/03) Applied For City & State City & State TAMPA FL 4. FEI Number TĂMPĂ FL 59-3415030 Not Applicable Country USA Country USA \$8.75 Additional 33625-4145 5. Certificate of Status Desired 33625-4145 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CHRISTINE TUTCHER TUTCHER, CHRISTINE Street Address (P.O. Box Number is Not Acceptable) 901 BELLE CHASE CIRCLE TAMPA, FL 33634 12703 COUNTRY BROOK LN TAMPA 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. TREASURER 9. Election Campaign Financing Make check payable to Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11 PVD XX Change ☐ Addition ☐ Delete TITLE TITLE RAGER, RYAN NAME RAGER, RYAN NAME 2725 PENZANCE ST STREET ADDRESS STREET ADDRESS 2725 PENZANCE ST PALM HARBOR, FL 34684 CITY-ST-ZIP CITY-ST-ZIP PALM HARBOR FL 34684 XX Change ■ Addition ☐ Detete TITLE TITLE TUTCHER, CHRISTINE NAME TUTCHER, CHRISTINE 901 BELLE CHASE CIRCLE STREET ADDRESS STREET ADDRESS 12703 COUNTRY BROOK LN TAMPA, FL 33634 CITY-ST-71P CITY-ST-ZIP TAMPA FL 33625-4145 XX Delete D ☐ Change ☐ Addition TITLE FONDRK, TERRY NAME NAME 1301 LILY CT STREET ADDRESS STREET ADDRESS TARPON SPRINGS, FL 34689 CITY-\$T-ZIP CITY+ST-ZIP ☐ Change ☐ Addition TITLE ŞD Delete MIMS, ALI NAME NAME 2027 OAK VIEW LANE STREET ADDRESS STREET ADDRESS PALM HARBOR, FL 34683 CITY-ST-ZIP CITY - ST - ZIP Addition Change Delete TITLE TITLE HOOPES, JOHN NAME NAME STREET ADDRESS 1122 DOGWOOD DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DUNEDIN FL 34698 ☐ Delete TITLE ☐ Channe X XAddition VD TITLE NAME NAME FONDRK, JOHN STREET ADDRESS STREET ADDRESS 575 TRADEWINDS DR 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 11 if

FILED Mar 03, 2005 8:00 am

813-968-6212