

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 23, 2006 08:00 AM
Secretary of State

DOCUMENT # N97000000262

1. Entity Name
MINORITY ENTERPRISE DEVELOPMENT
CORPORATION OF TAMPA BAY, INC.



Principal Place of Business
1101 CHANNELSIDE DRIVE, #210
TAMPA, FL 33602

Mailing Address
1101 CHANNELSIDE DRIVE, #210
TAMPA, FL 33602



02062006 No Chg-NP CR2E037 (11/05)

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4. FEI Number
59-3421408

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HURST, IRENE
1101 CHANNELSIDE DR.
SUITE 210
TAMPA, FL 33602

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MANER, MACHELLE
STREET ADDRESS	100 SO ASHLEY STE 1000
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	TD
NAME	HURST, IRENE
STREET ADDRESS	1101 CHANNELSIDE DR. STE 210
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	D
NAME	WIMBERLY, FRANCES
STREET ADDRESS	2105 NORTH NEBRASKA AVENUE
CITY-ST-ZIP	TAMPA, FL 33602
TITLE	D
NAME	DARRELL, LYNETTE
STREET ADDRESS	P.O. BOX 111
CITY-ST-ZIP	TAMPA, FL 33601
TITLE	D
NAME	JOHNSON, CYNTHIA
STREET ADDRESS	13805 58TH STREET N. SUITE 1-200
CITY-ST-ZIP	CLEARWATER, FL 33760
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/07/06-80010-011 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Irene Hurst IRENE HURST, TREASURER

2/6/06
Date

813-905-5802
Daytime Phone #