## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000004456

FILED Jan 19, 2006 Secretary of State

Entity Name: SPEAK UP TAMPA BAY PUBLIC ACCESS TELEVISION, INC.

Current Principal Place of Business: New Principal Place of Business:

Current Mailing Address: New Mailing Address:

1001 NORTH B ST TAMPA, FL 33606 US 1001 W. NORTH B ST TAMPA, FL 33606 US 13606 US

FEI Number: 31-1612170 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SNYDER, DAVID M 600 S. MAGNOLIA AVENUE SUITE 225 TAMPA, FL 33606 US

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:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 EASON, BENJAMIN
 Name:
 WEISSE, MARSHA

 Address:
 810 N. HOWARD AVENUE
 Address:
 PO BOX 13408

 City-St-Zip:
 TAMPA, FL 33606
 City-St-Zip:
 TAMPA, FL 33681

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: WEISSE, MARSHA Name: MORRIS, CALEB

Address: PO BOX 13408 Address: 26845 HAVERHILL DRIVE
City-St-Zip: TAMPA, FL 33681 City-St-Zip: LUTZ, FL 33559

Title: SD () Delete Title: SD (X) Change () Addition Name: CRINO, BRYAN Name: CRINO, BRYAN

Address: 720 SOUTH WILLOW Address: 100 S. ASHLEY DRIVE # 1210

City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33602

Title: VD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 DARDENNE, BOB
 Name:

 Address:
 140 7TH AVENUE S
 Address:

 City-St-Zip:
 SAINT PETERSBURG, FL 33701
 City-St-Zip:

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: MARSHA WEISSE PD 01/19/2006