

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005878

FILED
Mar 22, 2006
Secretary of State

Entity Name: GREATER TAMPA BAY CHAPTER OF ACP CORPORATION

Current Principal Place of Business:

P.O. BOX 17761
CLEARWATER, FL 33762

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 17761
CLEARWATER, FL 33762

New Mailing Address:

FEI Number: 59-3547298

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOCK, JERRY B
888 CARILLON PARKWAY
SAINT PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

BABCOCK, WILLIAM G
PO BOX 7020
CLEARWATER, FL 33758 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: WM. G. BABCOCK

03/22/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BOCK, JERRY B
Address: 888 CARILLON PARKWAY
City-St-Zip: ST PETERSBURG, FL 33716

Title: TD () Delete
Name: BABCOCK, WILLIAM
Address: 4801 ULMERTON ROAD
City-St-Zip: CLEARWATER, FL 33762

Title: SD () Delete
Name: STEVENS, WENDI
Address: 11515 53RD STREET
City-St-Zip: NORTH CLEARWATER, FL 337800388

Title: D () Delete
Name: ANDERSON, ALLAN
Address: 11601 ROOSEVELT BLVD.
City-St-Zip: ST PETERSBURG, FL 33716

Title: D () Delete
Name: BROWN, DENISE
Address: 880 CARILLON PARKWAY
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: D () Delete
Name: PROVANSANO, LINDA
Address: 5350 TECH DATA DRIVE
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HASTINGS, WILLIAM L
Address: 15321 SPRUSON STREET
City-St-Zip: ODESSA, FL 33556

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

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

Title: D (X) Change () Addition
Name: ELLIOT, STEVE
Address: 10238 WOODFORD BRIDGE STEET.
City-St-Zip: TAMPA, FL 33626

Title: D (X) Change () Addition
Name: LYNN, HAWKINS
Address: 880 CARILLON PARKWAY
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: () Change () Addition
Name:
Address:
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: WM. G. BABCOCK

TD

03/22/2006

Electronic Signature of Signing Officer or Director

Date