

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000730

FILED
May 06, 2004
Secretary of State

Entity Name: TAMPA BAY HERALDS OF HARMONY CHARITABLE FOUNDATION, INC.

Current Principal Place of Business:

3303 W. WALLCRAFT AVE.
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

P.O. 22731
TAMPA, FL 33622

New Mailing Address:

FEI Number: 31-1696779

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERENICH, TIMOTHY B
3204 ALTERNATE 19
PALM HARBOR, FL 34683 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: D () Delete
Name: NEWTON, EARL
Address: 12401 22ND STREET N #H702
City-St-Zip: TAMPA, FL 33612

Title: D () Delete
Name: SCALISE, RAY
Address: 3066 PELICAN PLACE
City-St-Zip: CLEARWATER, FL 33762

Title: PTD () Delete
Name: FOWLER, WILLIAM
Address: 3303 W. WALLCRAFT AVE.
City-St-Zip: TAMPA, FL 33622

Title: SD () Delete
Name: AUTRY, SPENCE
Address: 1508 W. PALM CIR
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: GREENFIELD, JACK
Address: 1968 DUNLOE CIRCLE
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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 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: SPENCE AUTRY

SD

05/06/2004

Electronic Signature of Signing Officer or Director

Date