

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006424

FILED
May 02, 2007
Secretary of State

Entity Name: TAMPA BAY AREA CHAPTER OF ARMA, INC.

Current Principal Place of Business:

11515 53RD STREET NORTH
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

P O BOX 23281
TAMPA, FL 33623

New Mailing Address:

FEI Number: 59-3614900 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

PARKER, CHRIS
11515 53RD STREET NORTH
CLEARWATER, FL 33760 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:

Title: PD () Delete
Name: SANCHEZ, BARBARA
Address: 2008 EAST 8TH AVENUE
City-St-Zip: TAMPA, FL 33605

Title: VD () Delete
Name: GOLDSMITH, JILL
Address: 2825 HAVERHILL DR
City-St-Zip: CLEARWATER, FL 33761

Title: S () Delete
Name: READ, DONNA
Address: 1556 CUMBERLAND CT. WEST
City-St-Zip: PALM HARBOR, FL 34683

Title: T () Delete
Name: PARKER, CHRIS
Address: 11515 53RD ST N
City-St-Zip: CLEARWATER, FL 33760

Title: D () Delete
Name: INGRAM, KIM
Address: 7201 RIVERWOOD BLVD
City-St-Zip: TAMPA, FL 33615

Title: D () Delete
Name: BROPHY, SANDRA
Address: 509 EAST AVENUE SOUTH
City-St-Zip: CLEARWATER, FL 33756

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: CHRIS PARKER

T

05/02/2007

Electronic Signature of Signing Officer or Director

Date