

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120289

Entity Name: TAMPA BAY PUTTING GREENS INC

FILED
Apr 28, 2005
Secretary of State

Current Principal Place of Business:

10740 EVENINGWOOD CT
TRINITY, FL 34655

New Principal Place of Business:

1515 AFRICAN VIOLET CT
TRINITY, FL 34655

Current Mailing Address:

10740 EVENINGWOOD CT
TRINITY, FL 34655

New Mailing Address:

1515 AFRICAN VIOLET CT
TRINITY, FL 34655

FEI Number: 20-0345157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMALL BUSINESS ACCOUNTING SERVICES
16017 NORTH FLORIDA AVE
STE 129
LUTZ, FL 33549 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DELNEGRO, PAMELA
Address: 10740 EVENINGWOOD CT
City-St-Zip: TRINITY, FL 34655

Title: VP () Delete
Name: OSTENSEN, GEORGE
Address: 14084 STERLING POINT DR
City-St-Zip: GAINSVILLE, VA 20155

Title: SEC () Delete
Name: OSTENSEN, MARGARET
Address: 14084 STERLING POINT DR
City-St-Zip: GAINSVILLE, VA 20155

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DELNEGRO, PAMELA
Address: 1515 AFRICAN VIOLET CT
City-St-Zip: TRINITY, FL 34655

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAMELA DELNEGRO

P

04/28/2005

Electronic Signature of Signing Officer or Director

Date