

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108297

FILED  
Apr 25, 2006  
Secretary of State

Entity Name: BAY AREA TRANSPORTATION CONSULTANTS INC.

## Current Principal Place of Business:

502 N OREGON AVENUE  
TAMPA, FL 33606 US

## New Principal Place of Business:

## Current Mailing Address:

502 N OREGON AVENUE  
TAMPA, FL 33606 US

## New Mailing Address:

FEI Number: 20-1393945

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MINARDI, DARRYL K  
502 N OREGON AVENUE  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

MINARDI, GLENN A  
502 N OREGON AVENUE  
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: GLENN A MINARDI

04/25/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MINARDI, DARRYL  
Address: 502 N OREGON AVENUE  
City-St-Zip: TAMPA, FL 33606 US

Title: VP ( ) Delete  
Name: MINARDI, LOUIS  
Address: 502 N OREGON AVENUE  
City-St-Zip: TAMPA, FL 336056 US

Title: TRE ( ) Delete  
Name: MINARDI, GLENN  
Address: 502 N OREGON AVENUE  
City-St-Zip: TAMPA, FL 33606

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P D (X) Change ( ) Addition  
Name: MINARDI, LOUIS A  
Address: 502 N OREGON AVENUE  
City-St-Zip: TAMPA, FL 33606 US

Title: STD (X) Change ( ) Addition  
Name: MINARDI, GLENN A  
Address: 502 N OREGON AVENUE  
City-St-Zip: TAMPA, FL 336056 US

Title: D (X) Change ( ) Addition  
Name: MINARDI, JOSEPH N  
Address: 502 N OREGON AVENUE  
City-St-Zip: TAMPA, FL 33606

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

SIGNATURE: GLENN A MINARDI

STD

04/25/2006

Electronic Signature of Signing Officer or Director

Date