2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000099966

Entity Name: 5150 OF TAMPA BAY, INC.

FILED Oct 05, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Principal Place of Business:	New Principal Place of Business:

810 ADDISON DRIVE NORTHEAST 3533 BENERAID ST.

ST PETERSBURG, FL 33716 LAND O LAKES, FL 34638

Current Mailing Address: New Mailing Address:

810 ADDISON DRIVE NORTHEAST 3533 BENERAID ST.

ST PETERSBURG, FL 33716 LAND O LAKES, FL 34638

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ELLINGSON, KAREN L
810 ADDISON DRIVE NORTHEAST

ELLINGSON, KAREN L
3533 BENERAID ST.

ST PETERSBURG, FL 33716 US LAND O LAKES, FL 34638 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: KAREN L. ELLINGSON 10/05/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ELLINGSON, KAREN L
 Name:
 ELLINGSON, KAREN L

 Address:
 810 ADDISON DRIVE NORTHEAST
 Address:
 3533 BENERAID ST.

 City-St-Zip:
 ST PETERSBURG, FL 33716
 City-St-Zip:
 LAND O LAKES, FL 34638

Title: D () Delete Title: () Change () Addition

 Name:
 CAHILL, JACKIE
 Name:

 Address:
 2515 W. KANSAS AVENUE, UNIT C
 Address:

 City-St-Zip:
 TAMPA, FL 33629
 City-St-Zip:

Name: WEBER, AMY M Name: WEBER, AMY M

Address: 810 ADDISON DRIVE NORTHEAST Address: 2520 W. KANSAS AVENUE, UNIT B

City-St-Zip: ST PETERSBURG, FL 33716 City-St-Zip: TAMPA, FL 33629

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: KAREN L. ELLINGSON D 10/05/2006