

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90107 049 ***150.00

DOCUMENT # P95000043949

1. Entity Name
WORLD TRADE CENTER GPTA, INC.



Principal Place of Business
**1101 CHANNELSIDE DRIVE
TAMPA, FL 33602 US**

Mailing Address
**1101 CHANNELSIDE DRIVE
TAMPA, FL 33602 US**

60023076



02192007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3380387

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BIERLEY, JOHN C
100 NORTH TAMPA ST
STE 2120
TAMPA, FL 33602**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS CISNEROS, FRANK G 500 NORTH WESTSHORE BLVD. 405 TAMPA, FL 33609 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BIERLEY, JOHN C 100 NORTH TAMPA STREET, 2120 TAMPA, FL 33602 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DV GARY, JOHN H III 4228 ARBORWOOD LANE TAMPA, FL 33624 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DT KRUSEN, WILLIAM A JR. 7650 COURTNEY CAMPBELL CAUSEWAY 112 TAMPA, FL 33607 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DC THAYER, BRONSON A 401 EAST JACKSON ST 2310 TAMPA, FL 33602 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

John C. Bierley, President 7/11/07 864-3600
(813)