

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000072886

FILED
Jul 08, 2005
Secretary of State

Entity Name: MAGIK STUDIOS OF TAMPA BAY INCORPORATED

Current Principal Place of Business:

3508 W GRACE ST
TAMPA, FL 33607 US

New Principal Place of Business:

3251 MORRIS ST N
SUITE D
ST PETERSBURG, FL 33713 US

Current Mailing Address:

1000 FRIENDLY WAY SOUTH
ST. PETERSBURG, FL 33705

New Mailing Address:

FEI Number: 59-3467645 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BACON, DAVID A
2959 FIRST AVENUE NORTH
ST. PETERSBURG, FL 33713 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

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:

Title: D () Delete
Name: BURKLEY, LLOYD
Address: 1000 FRIENDLY WAY SOUTH
City-St-Zip: ST. PETERSBURG, FL 33705

Title: D () Delete
Name: BURKLEY, JUDY G
Address: 1000 FRIENDLY WAY SOUTH
City-St-Zip: ST. PETERSBURG, FL 33705

Title: D () Delete
Name: BURKLEY, JENNIFER
Address: 1000 FRIENDLY WAY SOUTH
City-St-Zip: ST. PETERSBURG, FL 33705

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:

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: LLOYD BURKLEY

PRES

07/08/2005

Electronic Signature of Signing Officer or Director

_____ Date