

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004 8:00 am
Secretary of State

02-23-2004 90040 037 ****61.25

DOCUMENT # 701968

1. Entity Name
TAMPA SPORTS CLUB INC



Principal Place of Business
**5601 MARINER STREET
SUITE 200
TAMPA, FL 33609**

Mailing Address
**P.O. BOX 10753
TAMPA, FL 33609**

34009714



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02132004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
23-7005562

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRIMMER, TERRY
5601 MARINER STREET
SUITE 200
TAMPA, FL 33609**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Terry R. Brimmer President

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

(NOTE: Registered Agent signature required when reinstating)

2-19-04

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **WELLS, TOM**
STREET ADDRESS **2614 W. KENNEDY BLVD.**
CITY-ST-ZIP **TAMPA, FL 33609**

TITLE **VP** ☐ Delete
NAME **BRIMMER, TERRY**
STREET ADDRESS **5601 MARINER STREET-SUITE 200**
CITY-ST-ZIP **TAMPA, FL 33609**

TITLE **2VP** ☐ Delete
NAME **COLE, TODD**
STREET ADDRESS **3020 W. LAUREL STREET**
CITY-ST-ZIP **TAMPA, FL 33607**

TITLE **D** ☐ Delete
NAME **DIAZ, LEO J**
STREET ADDRESS **9703 HIDDEN COVE COURT**
CITY-ST-ZIP **TAMPA, FL 33618**

TITLE **D** ☒ Delete
NAME **LEVY, GEORGE A**
STREET ADDRESS **2614 W. KENNEDY BLVD.**
CITY-ST-ZIP **TAMPA, FL 33609**

TITLE **D** ☐ Delete
NAME **WINN, RONALD**
STREET ADDRESS **5601 MARINER STREET-SUITE 200**
CITY-ST-ZIP **TAMPA, FL 33609**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition
NAME **BRIMMER, TERRY**
STREET ADDRESS **5601 MARINER STREET-SUITE 200**
CITY-ST-ZIP **TAMPA, FL 33609**

TITLE **VP** ☒ Change ☐ Addition
NAME **COLE, TODD**
STREET ADDRESS **3020 W LAUREL STREET**
CITY-ST-ZIP **TAMPA, FL 33607**

TITLE **2VP** ☐ Change ☐ Addition
NAME **SEDLA, REGINALD**
STREET ADDRESS **5133 ESLA KEY BLVD**
CITY-ST-ZIP **ST PETERSBURG, FL 33715**

TITLE **I** ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Change ☐ Addition
NAME **WELLS, TOM**
STREET ADDRESS **2614 W. KENNEDY BLVD.**
CITY-ST-ZIP **TAMPA, FL 33609**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 617, 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:

Terry R. Brimmer President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-19-04 813 282340

Date

Daytime Phone #