2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 701968

1. Entity Name

TAMPA SPORTS CLUB INC.

OF WE IND

FILED May 05, 2003 8:00 am § Secretary of State

05-05-2003 90395 048 ****61.25

	TOTTO OLOG ING		1		Ì					
Principal Place 5601 MARINER SUITE 200 TAMPA FL 336		Mailing Address P.O. BOX 10753 TAMPA FL 33609	O. BOX 10753							
2. Principal f	Place of Business	3. Mailing Addres	s							
Suite, Apt.	.#, etc.	Suite, Apt. #, e	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & Stat	te	City & State			4. FEI Number 23-70055	i62	[A	pplied For]	
Zip Country		Zip	Zip Country		<u> </u>		8. 75 Ad	ot Applicable		
				·	5. Certificate of Status Des	F	ee Require			
	6. Name and Address of Current	Registered Agent		Name	7. Name and Address of N	lew Registered Ac	jent 		_	
BRIMMER	R, TERRY			Street Address (P.O. Box Number is Not Accep	stable)			1	
5601 MA	riner street									
SUITE 20										
TAMPA F	.r. 22008		,	City		FL	Zip Cod	de		
	e named entity submits this statement for tions of registered agent.	or the purpose of char	ging its registered	office or register	ed agent, or both, in the State	of Florida. I am fa	miliar with,	, and accept		
i tio obliga	to to ground again.									
SIGNATURE			WOTE & Local Land							
	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Registered Ac	gent signature required	when reinstating)	DATE			ļ	
	FILE NOW: FEE IS \$61.25		tion Campaign Fina Fund Contribution		\$5.00 May Be Added to Fees	Make Check Iorida Departr				
10.	OFFICERS AND DI	EECTORS	11.		ADDITIONS/CHANGES TO OF	FICERS AND DIRE	CTORS IN	V 10	1	
TITLE	P	Dele	te TITLE	P			Change	Addition	3	
NAME	DIAZ, LEO J	\mathcal{A}_{q}^{-1}	NAME		LS, TOM				(10/02)	
STREET ADDRESS CITY-ST-ZIP	9703 HIDDEN COVE CT TAMPA FL 33618		STREET A	2014	4 W. KENNEDY BLV PA. FL 33609	D			F037	
TITLE	VP	∑ Dele		VP	PA, FL 33009		7 Change	Addition	2	
NAME	WELLS, TOM		NAME	BRI	MMER, TERRY			/ 4	0	
STREET ADDRESS CITY-ST-ZIP	2614 W KENNEDY BLVD		STREET A	ADDRESS 560	1 MARINER STREET	- SUITE 2	200		}	
TITLE	TAMPA FL 33609	T Dele		1 / 1 / 1 / 1	PA, FL 33609	· · · · · ·	Change	Addition		
NAME	MANCINIK, JEFF	AP Dele	NAME	-2VP	E, TODD		unange_	DU AUGILION	 	
STREET ADDRESS	2801 W BUSCH BLVD #220		STREET A	ADDRESS 302	O W. LAUREL STRE	ET				
CITY-ST-ZIP	TAMPA FL 33618		CITY-ST		PA, FL 33607				-	
TITLE NAME	D CARTER, JOHN	Æ Dele	te TITLE NAME	D	7 150 1	,	Change	☐ Addition		
STREET ADDRESS	15546 TIMBERLINE DR		STREET A	DODGECC I	Z, LEO J	UDT				
CITY-ST-ZIP	TAMPA FL 33624	·	CITY-ST		3 HIDDEN COVE CO PA. FL 33618	UKI				
TITLE	D	Dele	te TITLE	D			Change	Addition		
NAME	BRIN, TERRY	•	NAME STREET A	LEV	Y, GEORGE A			·		
STREET ADDRESS CITY-ST-ZIP	14021 B N DALEMABRY TAMPA FL 33618		STREET A	100RESS 2614	4 W. KENNEDY BLV	D			l	
TITLE	D	Dele		- I AM	PA. FL 33609	<u> </u>	Change	- Addition	1	
NAME	SPARTS, ROBERT M	JE-SE LIBIT	NAME	D		ı		Prodition	1	
	JOI ARIO, RODENT IN		INVINE	LITAIN	I DOMALD				1	
STREET ADDRESS	8315 MILLWOOD DRIVE TAMPA FL 33615		STREET A		I, RONALD MARINER STREET	_ כווודב י	nn			

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 cath; 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: _

RHGIRATOLUS REQUIRED

04-28-03

813-282-3400