2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#723340

Jul 31, 2008 Secretary of State

Entity Name: THE TAMPA RACQUET CLUB, INC.

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

5820 N CHURCH AVENUE 5820 N CHURCH AVENUE

TAMPA, FL 33614 LOUNGE #114

TAMPA, FL 336145650 US

Current Mailing Address: New Mailing Address:

5820 N. CHURCH AVE. 5820 N. CHURCH AVE.

LOUNGE #114 LOUNGE #114

TAMPA, FL 33614 US TAMPA, FL 336145650 US

FEI Number: 23-7393107 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

TAYLOR, KATHRYN IRMA

5820 N. CHURCH AVE.

UNIT 238

TAMBA EL 33614 LIS

TAMBA EL 33614 LIS

TAMPA, FL 33614 US TAMPA, FL 336145650 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: 07/31/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 STEAVPACK, ALLAN
 Name:
 STEAVPACK, ALLAN

 Address:
 5820 N. CHURCH AVE #114
 Address:
 5820 N. CHURCH AVE #114

Address: 5820 N. CHURCH AVE #114 Address: 5820 N. CHURCH AVE #114 City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 336145650 US

(X) Change () Addition Title: () Delete Title: LANGWORTHY, KENNETH Name: Name: LANGWORTHY, KENNETH Address: 5820 N. CHURCH AVE #353 Address: 5820 N. CHURCH AVE #353 City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 336145650 US

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

 Name:
 Name:
 TAYLOR, KATHRYN I

 Address:
 Address:
 5820 N. CHURCH AVE. #238

 City-St-Zip:
 City-St-Zip:
 TAMPA;, FL 336145650 US

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLAN STEAVPACK PD 07/31/2008