

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723340

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE TAMPA RACQUET CLUB, INC.

Current Principal Place of Business:

5820 N CHURCH AVENUE
LOUNGE #114
TAMPA, FL 336145650 US

New Principal Place of Business:

5820 N CHURCH AVENUE
TAMPA, FL 336145650 US

Current Mailing Address:

5820 N. CHURCH AVE.
LOUNGE #114
TAMPA, FL 336145650 US

New Mailing Address:

FEI Number: 23-7393107

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, KATHRYN IRMA
5820 N. CHURCH AVE.
UNIT 238
TAMPA, FL 336145650 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STEAVPACK, ALLAN
Address: 5820 N. CHURCH AVE #114
City-St-Zip: TAMPA, FL 336145650 US

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

Title: STD () Delete
Name: TAYLOR, KATHRYN I
Address: 5820 N. CHURCH AVE. #238
City-St-Zip: TAMPA, FL 336145650 US

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 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

04/16/2009

Electronic Signature of Signing Officer or Director

Date