

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753244

FILED
Apr 14, 2009
Secretary of State

Entity Name: TEMPLE TERRACE FRIENDSHIP CLUB, INC.

Current Principal Place of Business:

720 DRUID HILLS RD
TEMPLE TERRACE, FL 33617 US

New Principal Place of Business:

417 BANNOCKBURN AVE
TEMPLE TERRACE, FL 33617 US

Current Mailing Address:

720 DRUID HILLS RD
TEMPLE TERRACE, FL 33617 US

New Mailing Address:

417 BANNOCKBURN AVE
TEMPLE TERRACE, FL 33617 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN-MCKINNEY, LYNN G
720 DRUID HILLS RD
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

SMITH, CLARANN
417 BANNOCKBURN AVE
TAMPA, FL 33617 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: CLARANN SMITH

04/14/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARTINEZ, LYNN
Address: 720 DAVID WILLS RD
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D2VP () Delete
Name: SMITH, CLARANN
Address: 417 BANNOCKBURN AVE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D2VP () Delete
Name: WALDON, ROSALIE
Address: 12401 PAMPAS PL
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SMITH, CLARANN
Address: 417 BANNOCKBURN AVE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D2VP (X) Change () Addition
Name: POMEROY, BOBBIE
Address: 6723 DRIFTING SANDS
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D2VP (X) Change () Addition
Name: OWENS, MARYROSE
Address: 110 S. LOCKMOOR AVE.
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: TREA () Change (X) Addition
Name: ZELLNER, JOYCE
Address: 11410 ROBLES DEL RIO PL
City-St-Zip: TEMPLE TERRACE,, FL 33617

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: JOYCE ZELLNER

TREA

04/14/2009

Electronic Signature of Signing Officer or Director

Date