

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003078

FILED  
Mar 02, 2009  
Secretary of State

Entity Name: TABLE SHUFFLEBOARD ASSOCIATION, INC.

**Current Principal Place of Business:**

12710 RED DEER PASS  
AUSTIN, TX 78729

**New Principal Place of Business:**

**Current Mailing Address:**

12710 RED DEER PASS  
AUSTIN, TX 78729

**New Mailing Address:**

FEI Number: 68-0346464      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

SPIEGEL & UTRERA, P.A.  
1840 CORAL WAY  
4TH FLOOR  
MIAMI, FL 33145 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: VPD ( ) Delete  
Name: SHEWBRIDGE, DAVE  
Address: 8450 LYNDAL ROAD  
City-St-Zip: PASADENA, MD 21122

Title: TD ( ) Delete  
Name: FRENCH, LYNDIA P  
Address: 12710 RED DEER PASS  
City-St-Zip: AUSTIN, TX 78729

Title: SD ( ) Delete  
Name: SEXTON, DEBBIE  
Address: 7222 HIDDEN TRAILS N  
City-St-Zip: SAN ANTONIO, TX 78244

Title: D ( ) Delete  
Name: CREAKBAUM, LARRY  
Address: 5105 BALTUSTROL DRIVE  
City-St-Zip: AVON, IN 46123

Title: D ( ) Delete  
Name: FREER, LOUISE C  
Address: 189 BARRY AVE  
City-St-Zip: LANSDALE, PA 19446

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: SEXTON, DEBBIE  
Address: 603 COBBLE DRIVE  
City-St-Zip: SAN ANTONIO, TX 78216

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: BOB, HUNT  
Address: 380 CEDAR RIVER WAY  
City-St-Zip: SACRAMENTO, CA 95831

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: LYNDIA P FRENCH

Electronic Signature of Signing Officer or Director

MRS

03/02/2009

\_\_\_\_\_ Date