

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006748

FILED
Apr 07, 2004
Secretary of State

Entity Name: WELCOME TO TAMPA BAY AREA INTERNATIONAL CLUB, INC.

Current Principal Place of Business:

13045 74TH AVENUE NORTH
SEMINOLE, FL 33776

New Principal Place of Business:

Current Mailing Address:

13045 74TH AVENUE NORTH
SEMINOLE, FL 33776

New Mailing Address:

FEI Number: 59-3748016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DURR, PADMINI
13045 74TH AVENUE NORTH
SEMINOLE, FL 33776 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: D () Delete
Name: DURR, PADMINI
Address: 13045 74TH AVENUE NORTH
City-St-Zip: SEMINOLE, FL 33776

Title: DS () Delete
Name: DASTOOR, TECHMI
Address: 9084 BAYWOOD PARK DRIVE
City-St-Zip: SEMINOLE, FL 33777

Title: D () Delete
Name: FERNANDEZ, MARITZA
Address: 9525 BLIND PASS ROAD #901
City-St-Zip: ST. PETERSBURG BEACH, FL 33706

Title: D () Delete
Name: BANG, KAREN
Address: 13045 74TH AVENUE NORTH
City-St-Zip: SEMINOLE, FL 33776

Title: DT () Delete
Name: PANAYOTTI, ARLENE
Address: 13045 74TH AVENUE NORTH
City-St-Zip: SEMINOLE, FL 33776

Title: D () Delete
Name: NATHAN PALANI, PARIMALA
Address: 13045 74TH AVENUE NORTH
City-St-Zip: SEMINOLE, FL 33776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DS (X) Change () Addition
Name: DASTOOR, TEHMI
Address: 9084 BAYWOOD PARK DRIVE
City-St-Zip: SEMINOLE, FL 33777

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

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

Title: DT (X) Change () Addition
Name: PANAYOTTI, ARLENE
Address: 1200 55TH STREET NORTH
City-St-Zip: ST PETERSBURG, FL 33710

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ARLENE PANAYOTTI/DIRECTOR TREASURER

DT

04/07/2004

Electronic Signature of Signing Officer or Director

Date