

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33996

FILED
Apr 13, 2009
Secretary of State

Entity Name: TAMPA CRUIS-A-CADE CLUB, INC.

Current Principal Place of Business:

TAMPA CRUIS-A-CADE CLUB
700 W. ROSS AVE.
TAMPA, FL 33603 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7686
TAMPA, FL 33673 US

New Mailing Address:

FEI Number: 59-6176972 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOPEZ, TIM
929 BEACON AVE.
TAMPA, FL 33603 US

Name and Address of New Registered Agent:

TAYLOR, ALBERT
5103 TALISMAN DR.
WIMAUMA, FL 33598 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: ALBERT TAYLOR

04/13/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LOPEZ, TIM
Address: 929 BEACON AVE.
City-St-Zip: TAMPA, FL 33603

Title: VP () Delete
Name: MIRANDA, MAYDA
Address: 3324 W. BRADDOCK ST.
City-St-Zip: TAMPA, FL 33607

Title: VP2 () Delete
Name: TEDDER, TODD
Address: 3715 GAVIOTA DR.
City-St-Zip: RUSKIN, FL 33573

Title: T () Delete
Name: TROTTO, SANDY
Address: 1617 BURNING TREE LANE
City-St-Zip: TAMPA, FL 33510

Title: S () Delete
Name: BENITEZ, MARGO
Address: P.O. BOX 93632
City-St-Zip: LARGO, FL 33804

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: TAYLOR, ALBERT
Address: PO BOX 7686
City-St-Zip: TAMPA, FL 33673

Title: VP (X) Change () Addition
Name: JOHNSON, DEANNA
Address: PO BOX 7686
City-St-Zip: TAMPA, FL 33673

Title: VP2 (X) Change () Addition
Name: TEDDER, TODD
Address: PO BOX 7686
City-St-Zip: TAMPA, FL 33673

Title: S (X) Change () Addition
Name: NORMAN-JOHNSTON, SANDRA
Address: PO BOX 7686
City-St-Zip: TAMPA, FL 33673

Title: T (X) Change () Addition
Name: MOREJON, JOSEPHINE
Address: PO BOX 7686
City-St-Zip: TAMPA, FL 33673

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: SANDRA NORMAN-JOHNSTON

S

04/13/2009

Electronic Signature of Signing Officer or Director

Date