

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004608

FILED  
Feb 08, 2010  
Secretary of State

**Entity Name:** THE CARIBBEAN AMERICAN CLUB, INC.

**Current Principal Place of Business:**

6211 S MARTINDALE AVEUE  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 320032  
TAMPA, FL 33679

**New Mailing Address:**

**FEI Number:** 59-3466877      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

TAYLOR, MARY L  
PREVATT ENGLAND & TAYLOR  
201 N FRANKLIN SUITE 2505  
TAMPA, FL 33602 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: P  
Name: HAMILTON, DANIEL  
Address: PO BOX 463  
City-St-Zip: LUTZ, FL 33548

Title: D  
Name: TATUM, JUNE  
Address: 3116 PRICE AVE  
City-St-Zip: TAMPA, FL 33611

Title: D  
Name: GRIFFITH, SADIE  
Address: 3211 SAN JUAN ST  
City-St-Zip: TAMPA, FL 33629

Title: D  
Name: BROWN, MARLENE  
Address: 3909 TREASURE CIR  
City-St-Zip: TAMPA, FL 33616

Title: D  
Name: MOORE, TAMMY  
Address: 3908 N RIDGE AVE  
City-St-Zip: TAMPA, FL 33603

Title: D  
Name: CAWLEY, JACQUELINE  
Address: 2815 MARLIN AVE  
City-St-Zip: TAMPA, FL 33611

I hereby 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 all other like empowered.

SIGNATURE: DANIEL HAMILTON

MR.

02/08/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date