2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008132

425 S GARDEN AVE

CLEARWATER, FL 33756

Address:

City-St-Zip:

Entity Name: 800 BUFFALO ASSOCIATION IN

FILED Jan 06, 2009 Secretary of State

Entity Nar	ne: 800 BUF	FALO ASSOCIATION, INC.			
Current Principal Place of Business:				New Principal Place of Business:	
800 W DR MARTIN LUTHER KING JR BLVD TAMPA, FL 33603				800 W DR MARTIN LUTHER KING JR BLVD 1 TAMPA, FL 33603	
Current Mailing Address:				New Mailing Address:	
800 W DR MARTIN LUTHER KING JR BLVD TAMPA, FL 33603			800 W DR MARTIN LUTHER KING JR BLVD 1 TAMPA, FL 33603		
FEI Number:	26-3272750	FEI Number Applied For ()	FEI Nur	mber Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:	
MATHESON, IAN 800 W DR MARTIN LUTHER KING JR BLVD TAMPA, FL 33603 US				MATHESON, IAN 800 W DR MARTIN LUTHER KING JR BLVD 1 TAMPA, FL 33603 US	
The above in the State	named entity of Florida.	submits this statement for the	purpose o	of changing its registere	d office or registered agent, or both,
SIGNATURE:				01/06/2009	
	Electro	nic Signature of Registered Ac	jent		Date
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KRIZ, FRANK	RTIN LUTHER KING JR BLVD		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MATHESON, IA	RTIN LUTHER KING JR BLVD		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	D (X KERR. ANN L	() Delete		Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: FRANK K. KRIZ, JR. DST 01/06/2009