2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 707659

Entity Name: CUBAN CIVIC CLUB, INC.

FILED Feb 17, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 260065 10905 N. MEMORIAL HWY TAMPA, FL 33685

TAMPA, FL 33615

Current Mailing Address: New Mailing Address:

P.O. BOX 260065 TAMPA, FL 33685

FEI Number: 59-1100923 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

TAMAYO, MARIO R CANASI, BELLA M 8212 SUNNYSLOPE DR. 10905 N. MEMORIAL HWY TAMPA, FL 33615 TAMPA, FL 33615

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: BELLA M. CANASI 02/17/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete TAMAYO, MARIA R CANASI, BELLA M Name: Name:

8212 SUNNYSLOPE DR. Address: 10316 CARROLLWOOD CT APT 52 Address: TAMPA, FL 33615 TAMPA, FL 33618

City-St-Zip: City-St-Zip:

(X) Change () Addition Title: () Delete Title: Name: ALVARO, MIREYA Name: SANCHEZ, HUGO

Address: 14314 KELLINGREW PL. Address: 6004 WILLIAMSBURG WAY

City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33625

Title: () Delete Title: (X) Change () Addition TAMAYO, MARIA GONZALEZ, MERCEDES Name: Name: 8212 SUNNYSLOPE DR. Address:

Address: 4505 N. ROME AVE APT 513 City-St-Zip: TAMPA, FL 33614 City-St-Zip: TAMPA, FL 33603

Title: () Delete Title: SD (X) Change () Addition Name: CARMONA, ADA G Name: MORALEJO, BERTHA

7008 OAKVIEW CIR Address: 3127 SLIGH AVE. APT. 101A Address: City-St-Zip: TAMPA, FL 336144719 City-St-Zip: TAMPA, FL 33634

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: BELLA M CANASI PD 02/17/2009