

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 729254

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** GREATER TAMPA SHOWMEN'S ASSOCIATON, INC.

**Current Principal Place of Business:**

608 N. WILLOW AVENUE  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

608 N. WILLOW AVENUE  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:** 59-0589730

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DILLMAN, TERESA P  
608 N. WILLOW AVE.  
TAMPA, FL 33606 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: DP  
Name: GAREY, MALCOLM  
Address: 608 N WILLOW AVE  
City-St-Zip: TAMPA, FL 33606

Title: DV  
Name: PALOMBI, ROBERT  
Address: 608 N WILLOW AVE  
City-St-Zip: TAMPA, FL 33606

Title: DV  
Name: STEVENS, LEE  
Address: 608 N WILLOW AVE  
City-St-Zip: TAMPA, FL 33606

Title: DV  
Name: JEONNOTTE, PAUL  
Address: 608 N WILLOW AVE  
City-St-Zip: TAMPA, FL 33606

Title: TS  
Name: KOZA, JOANN  
Address: 608 N WILLOW AVE  
City-St-Zip: TAMPA, FL 33606

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:** MALCOLM GAREY

PRES

04/26/2010

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

\_\_\_\_\_  
Date