

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746541

FILED
Mar 14, 2011
Secretary of State

Entity Name: FLORIDA POWER CLUB

Current Principal Place of Business:

C/O PAT CORBISSERO
6565 38TH AVENUE NORTH
SAINT PETERSBURG, FL 33710 US

New Principal Place of Business:

Current Mailing Address:

C/O PAT CORBISSERO
6565 38TH AVENUE NORTH
SAINT PETERSBURG, FL 33710 US

New Mailing Address:

FEI Number: 59-6004292

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORBISSERO, PATRICIA L
6565 38TH AVENUE NORTH
SAINT PETERSBURG, FL 33710 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: VOGEL, DEBORAH
Address: 299 1ST AVENUE N.
City-St-Zip: SAINT PETERSBURG, FL 33701 US

Title: V
Name: KEIST, JESSICA
Address: 299 1ST AVENUE N.
City-St-Zip: SAINT PETERSBURG, FL 33701 US

Title: T
Name: CORBISSERO, PATRICIA
Address: 6565 38TH AVENUE NORTH
City-St-Zip: SAINT PETERSBURG, FL 33710 US

Title: D
Name: MAKO, HELENE
Address: 299 1ST AVENUE N
City-St-Zip: SAINT PETERSBURG, FL 33701 US

Title: D
Name: PEREZ, MARIELA
Address: 299 1ST AVENUE N.
City-St-Zip: SAINT PETERSBURG, FL 33701 US

Title: D
Name: SALVAREZZA, ANTHONY
Address: 299 1ST AVENUE N.
City-St-Zip: SAINT PETERSBURG, FL 33701 US

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: DEBORAH VOGEL

P

03/14/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date