

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753493

FILED
Apr 10, 2009
Secretary of State

Entity Name: BAY CITY FLYERS, INC.

Current Principal Place of Business:

22500 STATE ROAD 52
LAND O LAKES, FL 34639 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 262982
TAMPA, FL 33615 US

New Mailing Address:

FEI Number: 59-2870221

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPINDLE, DALE
3318 CHAPEL CREEK CIRCLE
WESLEY CHAPEL, FL 33544 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: D () Delete
Name: SLAUGHTER, JIM DIR
Address: 5723 GOLDEN OWL LOOP
City-St-Zip: LAND O LAKES, FL 34639

Title: T () Delete
Name: SPINDLE, DALE TREASUR
Address: 3318 CHAPEL CREEK CIRCLE
City-St-Zip: WESLEY CHAPEL, FL 33543 US

Title: S () Delete
Name: DIESU, MICHAEL SEC
Address: 8141 AMBERSWEET PLACE
City-St-Zip: LAND O LAKES, FL 34639 US

Title: DP () Delete
Name: POULTON, CHARLES PRES
Address: 3447 TREIMAN BLVD
City-St-Zip: RIDGE MANOR, FL 33523

Title: VP () Delete
Name: NORRIS, TIMOTHY
Address: 3804 CANNULWOOD PLACE CIRCLE
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: KEIL, WERNER DIR
Address: 4125 SETON CIRCLE
City-St-Zip: PALM HARBOR, FL 34683 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

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Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DALE SPINDLE

T

04/10/2009

Electronic Signature of Signing Officer or Director

Date