2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#763611

FILED Apr 30, 2009 Secretary of State

Entity Name: NAIOP TAMPA BAY CHAPTER INC

Entity Nan	ne: NAIOP I <i>f</i>	AMPA BAY CHAPTER, INC.				
Current Principal Place of Business:			New Princi	New Principal Place of Business:		
6107-B ME TAMPA, FL	MORIAL HIGH 33615 US					
Current Mailing Address:			New Mailin	New Mailing Address:		
6107-B ME TAMPA, FL	MORIAL HWY 33615					
FEI Number:	59-2504370	FEI Number Applied For()	FEI Number Not Applic	cable () Certificate of Status Desired ()		
Name and	Address of C	urrent Registered Agent:	Name and A	Address of New Registered Agent:		
TAMPA, FL	MORIAL HWY 33615 US named entity s	3	ourpose of changing its	s registered office or registered agent, or both,		
SIGNATUR	RE:					
	Electron	ic Signature of Registered Age	ent	Date		
OFFICERS	AND DIREC	TORS:	ADDITIONS	S/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	PPD () KRUEGER, ROI 6302 BENJAMIN TAMPA, FL		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	TOMBRINK, ST	' PT DR. W. #560	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	PPD () LAW, RHEA 501 E KENNED TAMPA, FL	Delete Y BLVD #1700	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	PD () WHITAKER, DA 4300 W. CYPRI TAMPA, FL 336	ESS ST. #850	Title: Name: Address: City-St-Zip:	PPD (X) Change () Addition WHITAKER, DALLAS 4300 W. CYPRESS ST. #850 TAMPA, FL 33607		
Title: Name: Address: City-St-Zip:	ED () GANG, NENA 6107-B MEMOR TAMPA, FL 336		Title: Name: Address: City-St-Zip:	()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.

SIGNATURE: NENA GANG ED 04/30/2009