## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#766300** 

Apr 13, 2009 Secretary of State

Entity Name: LOWRY PARK ZOOLOGICAL SOCIETY OF TAMPA, INC.

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

7530 NORTH BLVD TAMPA, FL 336044756

**Current Mailing Address: New Mailing Address:** 

7530 NORTH BLVD TAMPA, FL 336044756

FEI Number: 59-2328289 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SALISBURY, C. ALEXANDER

PUGH, CRAIG 7530 NORTH BOULEVARD 7530 NORTH BOULEVARD TAMPA, FL 33604 TAMPA, FL 33604

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: CRAIG PUGH 04/13/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition SALISBURY, C. ALEXANDER PUGH, CRAIG Name: Name:

7530 NORTH BLVD Address: 7530 NORTH BLVD Address: City-St-Zip: TAMPA, FL 33606 City-St-Zip: TAMPA, FL 33606

Title: () Delete Title: () Change () Addition

MARTINEZ, BOB GOV Name: Name: Address: CORPORATE CTR 3,4221 BOY SCOUT BLVD Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip:

Title: () Delete Title: () Change () Addition

BLANCHARD, BILL Name: Name: 1414 SWANN AVE STE 210 Address: Address: City-St-Zip: TAMPA, FL 33606 City-St-Zip:

Title: ( ) Delete Title: () Change () Addition

Name: THOMAS, ROBERT Name: 2 RIVERS RANCH, 40 RANCH ROAD Address: Address: City-St-Zip: THONOTOSASSA, FL 33592 City-St-Zip:

Title: Title: ( ) Delete () Change () Addition

COUCH, BRETT Name: Name: 100 N. TAMPA ST., SUITE 3100 Address: Address: City-St-Zip: TAMPA, FL 33602 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

KRYSTYN, ELIZABETH KRYSTYN FLIZABETH Name: Name: Address: 3507 BAYSHORE DR. Address: 3507 BAYSHORE DR. TAMPA, FL 33629 TAMPA, FL 33629 City-St-Zip: 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: CRAIG PUGH Ρ 04/13/2009