

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766876

FILED  
Jan 14, 2009  
Secretary of State

**Entity Name:** TAMPA BAY REFORESTATION AND ENVIRONMENTAL EFFORT, INCORPORATED

**Current Principal Place of Business:**

1001 W. BAKER STREET  
PLANT CITY, FL 33563

**New Principal Place of Business:**

904 LOGANDERRY LANE #104  
PLANT CITY, FL 33563

**Current Mailing Address:**

P.O. BOX 23253  
TAMPA, FL 336233253

**New Mailing Address:**

**FEI Number:** 59-2235005

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RICHARD A. BAILEY  
10323 U.S. 301 SOUTH  
RIVERVIEW, FL 33569 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: PTD ( ) Delete  
Name: MORIATY, WILLIAM,  
Address: 1001 W. BAKER ST. 03  
City-St-Zip: PLANT CITY, FL 33563

Title: VD ( ) Delete  
Name: SCHEIBLE, ROBERT,  
Address: 6220 EUREKA SPRINGS ROAD  
City-St-Zip: TAMPA, FL 33610

Title: SD ( ) Delete  
Name: STRICKLAND, RICK,  
Address: 16117 LYTHAM DR.  
City-St-Zip: TAMPA, FL 33556

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: MORIATY, WILLIAM,  
Address: 904 LOGANDERRY LANE #104  
City-St-Zip: PLANT CITY, FL 33563

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: WILLIAM MORIATY

PTD

01/14/2009

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

\_\_\_\_\_  
Date