

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J54279

**FILED**  
**Jan 26, 2010**  
**Secretary of State**

**Entity Name:** TASTE OF TAMPA BAY, INC.

**Current Principal Place of Business:**

300 BAY ST.  
OZONA, FL 346607727

**New Principal Place of Business:**

**Current Mailing Address:**

300 BAY ST.  
OZONA, FL 346607727

**New Mailing Address:**

**FEI Number:** 59-2764899

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NOELL, CHERYL L  
201 OLD OAK LN  
OZONA, FL 34660 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** PSD  
**Name:** NOELL, ROBERT E.  
**Address:** 1232 ADAMS AVENUE  
**City-St-Zip:** CLEARWATER, FL

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** CHERYL L NOELL

MS

01/26/2010

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

\_\_\_\_\_  
Date