2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007098

Entity Name: SOUTH TAMPA ATHLETICS, INC.

FILED Apr 20, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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3702 BEACH DR. TAMPA, FL 33607

Current Mailing Address: New Mailing Address:

PO BOX 10563 TAMPA, FL 33679 05

FEI Number: 59-3696092 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:

SCHULZ, KATHY
3801 S WESTSHORE BLVD.
TAMPA, FL 33611 US
SCHULZ, KATHLEEN
3801 S WESTSHORE BLVD.
TAMPA, FL 33611 US

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: KATHLEEN SCHULZ 04/20/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SCHULZ, RICHARD
 Name:
 SCHULZ, KATHLEEN

 Address:
 3615 BELCHER DRIVE
 Address:
 3615 BELCHER DRIVE

 City-St-Zip:
 TAMPA, FL 33629
 TAMPA, FL 33629

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

 Name:
 CANCINO, RHONDA
 Name:

 Address:
 1533 AUBURN OAKS
 Address:

 City-St-Zip:
 AUBURNDALE, FL 33823
 City-St-Zip:

 Name:
 PIETRO, JOSEPH
 Name:
 PIETRO, THERESA

 Address:
 3813 WEST BAY AVENUE
 Address:
 3813 WEST BAY AVENUE

 City-St-Zip:
 TAMPA, FL 33611
 City-St-Zip:
 TAMPA, FL 33611

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

 Name:
 SCHULZ, KATHY
 Name:

 Address:
 3615 BELCHER DRIVE
 Address:

 City-St-Zip:
 TAMPA, FL 33611
 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: KATHLEEN SCHULZ D 04/20/2008