

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007416

FILED
Jul 02, 2009
Secretary of State

Entity Name: PROJECT MANAGEMENT INSTITUTE, TAMPA BAY CHAPTER, INC.

Current Principal Place of Business:

15205 HAMMOCK CHASE CT.
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 26701
TAMPA, FL 33623

New Mailing Address:

FEI Number: 59-3700465 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SLAUGHTER, MARION D
15205 HAMMOCK CHASE CT.
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

NOAH, GYIMAH
15205 HAMMOCK CHASE CT.
ODESSA, FL 33556 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: NOAH GYIMAH

07/02/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WHITE, DIANE
Address: 15205 HAMMOCK CHASE CT.
City-St-Zip: ODESSA, FL 33556

Title: PE () Delete
Name: HSU, ADAM
Address: 15205 HAMMOCK CHASE CT.
City-St-Zip: ODESSA, FL 33556

Title: T () Delete
Name: SLAUGHTER, MARION
Address: 15205 HAMMOCK CHASE CT.
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HSU, ADAM
Address: 15205 HAMMOCK CHASE CT.
City-St-Zip: ODESSA, FL 33556

Title: PE (X) Change () Addition
Name: JAMES, GOTHARD
Address: 15205 HAMMOCK CHASE CT.
City-St-Zip: ODESSA, FL 33556

Title: VP F (X) Change () Addition
Name: NOAH, GYIMAH
Address: 15205 HAMMOCK CHASE CT.
City-St-Zip: ODESSA, FL 33556

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: NOAH GYIMAH

VP F

07/02/2009

Electronic Signature of Signing Officer or Director

Date