

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00257

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: ITHOA, INC.

## Current Principal Place of Business:

P.O. BOX 2021  
PALM HARBOR, FL 34682

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 2021  
PALM HARBOR, FL 34682

## New Mailing Address:

FEI Number: 59-2383746

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

INGHRAM, ROBERT D JR.  
1470 ROLLING RIDGE RD  
PALM HARBOR, FL 34683 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: P ( ) Delete  
Name: SCHRAMAK, ANDY  
Address: 1456 ROLLING RIDGE RD  
City-St-Zip: PALM HARBOR, FL 34683

Title: VP ( ) Delete  
Name: WILLIAMS, MARK  
Address: 1482 TREETOP DR  
City-St-Zip: PALM HARBOR, FL 34683

Title: T ( ) Delete  
Name: INGHAM, ROBERT JR D  
Address: 1470 ROLLING RIDGE RD  
City-St-Zip: PALM HARBOR, FL 34683

Title: S ( ) Delete  
Name: HOKE, TERRY  
Address: 2464 INDIAN TRAIL WEST  
City-St-Zip: PALM HARBOR, FL 34683

Title: D (X) Delete  
Name: MARVOS, CHRIS  
Address: 2444 SENECA CT  
City-St-Zip: PALM HARBOR, FL 34683

Title: D (X) Delete  
Name: ARNTZ, JAMES  
Address: 2456 INDIAN TRAIL WEST  
City-St-Zip: PALM HARBOR, FL 34683

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: DOYLE, RICHARD  
Address: 1471 ROLLING RIDGE RD  
City-St-Zip: PALM HARBOR, FL 34683

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: WYNN, BUD  
Address: 1485 ROLLING RIDGE RD  
City-St-Zip: PALM HARBOR, FL 34683

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: ROBERT INGHAM

T

04/21/2009

Electronic Signature of Signing Officer or Director

Date