2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007311

Entity Name: TAMPA PORT MINISTRIES, INC.

FILED Mar 24, 2009 Secretary of State

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|---|---|----------------------------------|-----------|---|--|--------------------------------------|--|--|
| Current Pr | rrent Principal Place of Business: MPA PORT MINISTRIES, INC. | | | | ipai Place o | of Business: | | |
| 1912 EAST | RT MINISTRIE PORT DRIVE . 336056757 | S, INC. | | | | | | |
| Current Mailing Address: | | | | New Mailing Address: | | | | |
| 1912 EAST | RT MINISTRIE PORT DRIVE . 336056757 | S, INC. | | | | | | |
| FEI Number: | 59-3755480 | FEI Number Applied For () | FEI Num | ber Not Appli | cable () | Certificate of Status Desired () | | |
| Name and Address of Current Registered Agent: | | | | | Name and Address of New Registered Agent: | | | |
| HORTON, I 1912 EAST TAMPA, FL | | (| | | | | | |
| The above in the State | named entity su of Florida. | ıbmits this statement for the pu | ırpose of | changing its | s registered | office or registered agent, or both, | | |
| SIGNATUR | :E: | | | | | | | |
| | Electronic | Signature of Registered Ager | nt | | | Date | | |
| OFFICERS | AND DIRECT | ORS: | | ADDITION | S/CHANGE | S TO OFFICERS AND DIRECTORS | | |
| Title: Name: Address: City-St-Zip: | REV () E HORTON, DENNI 1912 EASTPORT TAMPA, FL 3360 | DR | ! | Title: Name: Address: City-St-Zip: | (| () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | MR ()EROY, WILCOX OF 13533 BAY LAKE TAMPA, FL 3361 | LANE | | Title: Name: Address: City-St-Zip: | AL, KOLCOT | VALE CIRCLE | | |
| Title: Name: Address: City-St-Zip: | PETER, BAKER | EDY BLVD, SUITE 300 | | Title: Name: Address: City-St-Zip: | (| () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | MR ()E HUGHES, WINGF 4027 CRESCENT RIVERVIEW, FL | PARK DRIVE | | Title: Name: Address: City-St-Zip: | (| () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | MR () E PATRICK, HARM 8813 HWY 41 SO RIVERVIEW, FL | DUTH | | Title: Name: Address: City-St-Zip: | (| () Change () Addition | | |
| Title: Name: Address: City-St-Zip: | MRS ()E HOLLAND, SHIRI 3006 MARLIN AV TAMPA, FL 3351 | E | | Title: Name: Address: City-St-Zip: | MRS (HOLLAND, SH 3006 MARLIN TAMPA, FL 3 | N AVE | | |

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: DENNIS HORTON REV 03/24/2009