

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000307

FILED
Apr 30, 2010
Secretary of State

Entity Name: TAMPA BAY T.E.A.M. CENTER, INC.

Current Principal Place of Business:

9007 GUNN HIGHWAY
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

9007 GUNN HIGHWAY
ODESSA, FL 33556

New Mailing Address:

FEI Number: 26-0036441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MITCHELL, NANCY
9007 GUNN HIGHWAY
ODESSA, FL 33556 US

Name and Address of New Registered Agent:

MITCHELL, NANCY PD
9007 GUNN HIGHWAY
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: NANCY MITCHELL

04/30/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: MITCHELL, NANCY
Address: 9007 GUNN HIGHWAY
City-St-Zip: ODESSA, FL 33556

Title: CD
Name: BROWN, KAREN
Address: 9007 GUNN HIGHWAY
City-St-Zip: ODESSA, FL 33556

Title: D
Name: POPE, TRINA
Address: 9007 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 33556

Title: SD
Name: GLENN, NICOLE
Address: 9007 GUNN HIGHWAY
City-St-Zip: ODESSA, FL 33556

Title: TD
Name: GORDON, CAMELIA
Address: 9007 GUNN HIGHWAY
City-St-Zip: ODESSA, FL 33556

Title: D
Name: BURCH, PHYLLIS
Address: 9007 GUNN HIGHWAY
City-St-Zip: ODESSA, FL 33556

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

SIGNATURE: NANCY MITCHELL

PD

04/30/2010

Electronic Signature of Signing Officer or Director

Date