2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002138

FILED Apr 19, 2008 Secretary of State

Entity Name: EXECUTIVE WOMEN'S GOLF ASSOCIATION OF TAMPA BAY, INC.

Current Principal Place of Business: New Principal Place of Business:

1001 BEACON AVE TAMPA, FL 33603

Current Mailing Address: New Mailing Address:

1001 BEACON AVE TAMPA, FL 33603

FEI Number: 65-0538988 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:

YOUNG, CHRISTINA C 400 NORTH ASHLEY DRIVE STE 1500 TAMPA, FL 33602 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

KANE, CYNTHIA ROGERS, PATRICIA Name: Name: 9338 WELLINGTON PARK AVE Address: 15810 SANCTUARY DRIVE Address:

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33647

Title: SD () Delete Title: (X) Change () Addition Name: LOVELL, BONNIE Name: ARMSTRONG, GRACE

Address: 13251 ROYAL GEORGE AVENUE Address: 1253 89TH AVENUE N City-St-Zip: ODESSA, FL 33556 City-St-Zip: ST. PETERSBURG, FL 33702

Title: () Delete Title: (X) Change () Addition ROGERS, PATRICIA E KLAY, CAROL Name: Name:

15810 SANCTUARY DRIVE Address: Address: 4630 W. BAY VILLA AVENUE

City-St-Zip: TAMPA, FL 33647 City-St-Zip: TAMPA, FL 33611

Title: () Change () Addition

() Delete TD Title: BUCKHOLZ, JÉAN Name: Name: 1001 BEACON AVE Address: Address: City-St-Zip: TAMPA, FL 33603 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: JEAN A. BUCKHOLZ TD 04/19/2008