## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000003041

FILED Jul 28, 2009 Secretary of State

Entity Name: TAMPA BAY AREA PROFESSIONAL VIDEOGRAPHERS ASSOCIATION, INC.

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

521 VINTAGE WAY
BRANDON, FL 33511
1839 MARSH WREN WAY
PALM HARBOR, FL 34683

Current Mailing Address: New Mailing Address:

521 VINTAGE WAY
BRANDON, FL 33511
1839 MARSH WREN WAY
PALM HARBOR, FL 34683

FEI Number: 81-0548769 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: Name and Address of New Registered Agent:

SCOTT, AARON
521 VINTAGE WAY
52648 CYPRESS RIDGE BLVD.
527 BRANDON, FL 33511 US
52648 CYPRESS RIDGE BLVD.
52648 CYPRESS RI

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: MIROSLAV BECK 07/28/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 SCOTT, AARON
 Name:
 BECK, MIROSLAV

 Address:
 521 VINTAGE WAY
 Address:
 2648 CYPRESS RIDGE BLVD #101

 City-St-Zip:
 BRANDON, FL 33511
 City-St-Zip:
 WESLEY CHAPEL, FL 33543

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

Name: HOHENTHANER, VANCE Name: SCOTT, AARON

Address: 4111 LAND O' LAKES BLVD., SUITE 301 Address: 4111 LAND O' LAKES BLVD., SUITE 210

City-St-Zip: LAND O LAKES, FL 34639 City-St-Zip: LAND O LAKES, FL 34639

 $\label{eq:Title:$ 

 Name:
 Name:
 FUHRMANN, DAVID L

 Address:
 Address:
 1839 MARSH WREN WAY

 City-St-Zip:
 City-St-Zip:
 PALM HARBOR, FL 34683

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: DAVID L FUHRMANN T 07/28/2009