

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2009
Secretary of State

DOCUMENT# N02000006324

Entity Name: TAMIAMI MASTER ASSOCIATION, INC.

Current Principal Place of Business:

16555 N CLEVELAND AVE
A
N FT MYERS, FL 339031411 US

New Principal Place of Business:

Current Mailing Address:

16555 N CLEVELAND AVE
A
N FT MYERS, FL 339031411 US

New Mailing Address:

FEI Number: 52-2374592 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ADAMS, JOSEPH E ESQ.
14241 METROPOLIS AVE.
SUITE 100
FORT MYERS, FL 33912 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: DT () Delete
Name: SCHUELLER, JOHN
Address: 16555A N CLEVELAND AVE
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: DV () Delete
Name: MACHADO, VIRGIL
Address: 16555A N CLEVELAND AVE
City-St-Zip: N FT MYERS, FL 33903 US

Title: DP () Delete
Name: KRYSZTOF, KENNETH
Address: 16555A N CLEVELAND AVE
City-St-Zip: N FT MYERS, FL 33903 US

Title: DS () Delete
Name: BECK, CATHERINE
Address: 16555A N CLEVELAND AVE
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: D () Delete
Name: WAGNER, JEAN
Address: 16555A N CLEVELAND AVE
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: D () Delete
Name: ROSS, MAX
Address: 16555A N CLEVELAND AVE
City-St-Zip: N FT MYERS, FL 33903 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: DELACEY, JEAN
Address: 16555A N CLEVELAND AVE
City-St-Zip: NORTH FORT MYERS, FL 33903 US

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: CATHERINE BECK

DS

03/27/2009

Electronic Signature of Signing Officer or Director

Date