

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 08, 2011
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:

BECKER & POLIAKOFF, P.A.
12140 CARISSA COMMERCE COURT
#200
FORT MYERS, FL 33966 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: T
Name: KRYSZTOF, KENNETH
Address: 16555A N CLEVELAND AVE
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: VP
Name: BASTIEN, GERALD
Address: 16555A N CLEVELAND AVE
City-St-Zip: N FT MYERS, FL 33903 US

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

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

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

Title: D
Name: EBSEN, ALFRED
Address: 16555A N CLEVELAND AVE
City-St-Zip: N FT MYERS, FL 33903 US

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: KENNETH KRYSZTOF

P

04/08/2011

Electronic Signature of Signing Officer or Director

Date