2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002959

Entity Name: EAST TAMPA BANDITS, INC.

FILED Jan 09, 2007 Secretary of State

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

8501 N. 50TH ST 9208 RACINE PL 806 RIVERVIEW, FL 33569

806 RIVEF TAMPA, FL 33617

Current Mailing Address: New Mailing Address:

PO BOX 11943 TAMPA, FL 336801943

FEI Number: 59-3660940 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POITER, SHARON K 8501 N. 50TH ST APT 806 POITER, SHARON K 9208 RACINE PL RIVERVIEW, FL 33569 US

TAMPA, FL 33617 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: SHARON K POITIER 01/09/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 MILTON, BENNETT
 Name:
 HENDERSON, DARREL

 Address:
 4816 N RIVER BLVD
 Address:
 5921 RIVA RIDGE

 City-St-Zip:
 TAMPA, FL 33603
 City-St-Zip:
 WESLEY CHAPEL, FL 33544

Title: T () Delete Title: TRES (X) Change () Addition Name: POITIER, SHARON Name: POITIER, SHARON

Address: 8501 N 50TH ST, APT 806 Address: 9208 RACINE PL
City-St-Zip: TAMPA, FL 33617 City-St-Zip: RIVERVIEW, FL 33569

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

 Name:
 HENDERSON, DARREL
 Name:
 JOHNSON, ERIC

 Address:
 5921 RIVARIDGE DR.
 Address:
 2608 E. 32ND AVE

 City-St-Zip:
 WESLEY CHAPEL, FL 33544
 City-St-Zip:
 TAMPA, FL 33610

I hereby certify that the information supplied with this filing does not qualify for the 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: SHARON K POITIER TRES 01/09/2007