

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000007475

FILED  
Jun 06, 2008  
Secretary of State

Entity Name: NAAAHR-TAMPA BAY CHAPTER, INC.

**Current Principal Place of Business:**

P. O. BOX 3261  
BRANDON, FL 33509

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 3261  
BRANDON, FL 33509

**New Mailing Address:**

FEI Number: 80-0164789      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:**

CHRISTY-MARTIN, SHEILA O  
2205 JENNIFER LANE  
VALRICO, FL 33594      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: D      ( ) Delete  
Name: CHRISTY-MARTIN, SHEILA O  
Address: P. O. BOX 3261  
City-St-Zip: BRANDON, FL 33509

Title: D      ( ) Delete  
Name: CHAMBERS, MIKKI  
Address: P. O. BOX 3261  
City-St-Zip: BRANDON, FL 33509

Title: D      ( ) Delete  
Name: DICKERSON, KISHA  
Address: P. O. BOX 3261  
City-St-Zip: BRANDON, FL 33509

Title: D      ( ) Delete  
Name: SMITH, YVONNE  
Address: P. O. BOX 3261  
City-St-Zip: BRANDON, FL 33509

Title: D      ( ) Delete  
Name: DUPAR, PAT  
Address: P. O. BOX 3261  
City-St-Zip: BRANDON, FL 33509

Title: D      ( ) Delete  
Name: BATIE, LAFERN  
Address: P. O. BOX 3261  
City-St-Zip: BRANDON, FL 33509

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

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: YVONNE SMITH

VP

06/06/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date