

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008681

FILED  
Mar 28, 2012  
Secretary of State

Entity Name: TRANS\*ACTION FLORIDA, INC.

**Current Principal Place of Business:**

3545 CENTRAL AVENUE  
#302  
ST. PETESBURG, FL 33713 54

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 10746  
ST. PETERSBURG, FL 33733

**New Mailing Address:**

FEI Number: 51-0464720

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

POLSON, DANNY-RAY  
3545 CENTRAL AVENUE  
#302  
ST. PETESBURG, FL 33713 54

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

POLSON, DANNY-RAY  
3545 CENTRAL AVENUE  
#302  
ST. PETESBURG, FL 33713 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:

03/28/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BYRD, RYAN  
Address: 644 63RD AVE S  
City-St-Zip: ST PETERSBURG, FL 33705

Title: V  
Name: SOUCY, CHRIS  
Address: 2176 CORINNE COURT, UNIT B  
City-St-Zip: ST. PETERSBURG, FL 33712

Title: S  
Name: POLSON, DANNY-RAY  
Address: 3545 CENTRAL AVENUE #302  
City-St-Zip: ST. PETESBURG, FL 33713 54

Title: T  
Name: HAMM, JACOBS  
Address: 4825 THIRD AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33713

Title: D  
Name: KEEFFE, MICHAEL T  
Address: 3545 CENTRAL AVENUE  
City-St-Zip: ST. PETERSBURG, FL 33713

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: DANNY-RAY POLSON

S

03/28/2012

Electronic Signature of Signing Officer or Director

Date