2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# N03000009137

Entity Name: WEST TAMPA CULTURAL SOCIETY INC

Current Principal Place of Business:

1718 W MAIN ST, PO BOX 45008
TAMPA, FL 33677

New Principal Place of Business:

1718 W MAIN ST,
TAMPA, FL 33677

Current Mailing Address:

PO BOX 45008
TAMPA, FL 33677

New Mailing Address:

FEI Number: 81-0636951 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JACKSON, VICTOR
1983 W MAIN ST
TAMPA, FL 33607 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: MCADOO, SABRINA
Address: 304 E JEAN ST
City-St-Zip: TAMPA, FL 33604

Title: P ( ) Delete
Name: BLACKMON, ANTHONY
Address: 14802 FLORIDA AVE
City-St-Zip: TAMPA, FL 33613

Title: V ( ) Delete
Name: TAYLOR, EVERITT
Address: 3812 N 53RD ST
City-St-Zip: TAMPA, FL 33619

Title: S ( ) Delete
Name: LEE, DON
Address: 3101 CHIPCO
City-St-Zip: TAMPA, FL 33605

Title: T ( ) Delete
Name: JOHNSON, HUEY
Address: 1143 CHESTNUT ST
City-St-Zip: TAMPA, FL 33607

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:

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: HUEY JONHSON T 04/13/2009

Electronic Signature of Signing Officer or Director — Date