

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009554

FILED  
Apr 09, 2008  
Secretary of State

**Entity Name:** TAMPA BAY BASEBALL COACHES ASSOCIATION, INC.

**Current Principal Place of Business:**

2127 W DR. MARTIN LUTHER KING JR BLVD  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

2127 W DR. MARTIN LUTHER KING JR BLVD  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 59-3778858

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCAGLIONE, PETER JR, ESQ  
2127 W DR. MARTIN LUTHER KING JR BLVD  
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: DP ( ) Delete  
Name: PERMUY, FRANK  
Address: 2127W. DR. MARTIN L. KING  
City-St-Zip: TAMPA, FL 33607

Title: DV ( ) Delete  
Name: FERNANDEZ, JOEY  
Address: 8605 SWANN RIDGE CT  
City-St-Zip: TAMPA, FL 33647

Title: DT ( ) Delete  
Name: FAEDO, LANDY  
Address: 2919 HEITER ST  
City-St-Zip: TAMPA, FL 33607

Title: DS ( ) Delete  
Name: ROHRBERG, DICK  
Address: 15602 LAKE GRACE DR  
City-St-Zip: ODESSA, FL 33556

**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:

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: PETER SCAGLIONE, JR.

ESQ.

04/09/2008

Electronic Signature of Signing Officer or Director

Date