

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002022

FILED
Apr 23, 2009
Secretary of State

Entity Name: SOUTH TAMPA BAY AREA TRANSPORTATION PARTNERSHIPS, INC.

Current Principal Place of Business:

222 10TH STREET WEST
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 155
BRADENTON, FL 34206

New Mailing Address:

FEI Number: 20-0791353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIRTAS, NEIL
222 10TH STREET WEST
BRADENTON, FL 34205 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: PAULMANN, JIM
Address: 6900 PROFESSIONAL PARKWAY EAST
City-St-Zip: SARASOTA, FL 34240

Title: D () Delete
Name: DERR, FREDERICK
Address: 3801 N. ORANGE AVE
City-St-Zip: SARASOTA, FL 34230

Title: D () Delete
Name: SESSIONS, DAVID
Address: 2902 HYDE PARK ST.
City-St-Zip: SARASOTA, FL 34239

Title: D () Delete
Name: SPIRTAS, NEIL
Address: 222 10TH ST W
City-St-Zip: BRADENTON, FL 34205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: SESSIONS, DAVID
Address: 5001 LAKEWOOD RANCH BLVD.
City-St-Zip: SARASOTA, FL 34240

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: NEIL SPIRTAS, SECRETARY/TREASURER

SEC.

04/23/2009

Electronic Signature of Signing Officer or Director

Date