

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010780

FILED
Mar 21, 2009
Secretary of State

Entity Name: KREWE OF ST. BRIGIT, INC.

Current Principal Place of Business:

24 BAFFIN AVE.
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

PO BOX 10218
TAMPA, FL 336790218

New Mailing Address:

FEI Number: 43-2015112

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUCE, LAURA A
24 BAFFIN AVE.
TAMPA, FL 33606 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: BRUCE, LAURA
Address: 24 BAFFIN AVE.
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: DIETZ, MARY
Address: 2406 WEST CHICAGO AVE.
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: GUSTAFSON, ZOE
Address: 5220 S. RUSSELL ST. #37
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: BOWEN, ROSA E
Address: 10015 HAMPTON PLACE
City-St-Zip: TAMPA, FL 33618

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: ROSA E. BOWEN

D

03/21/2009

Electronic Signature of Signing Officer or Director

Date