

DOCUMENT# N05000001208

FILED
Jan 07, 2009
Secretary of State

Entity Name: AMERICAN DISC JOCKEY ASSOCIATION OF TAMPA BAY INC.

Current Principal Place of Business:

3044 GLEN OAK AVE
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

12403 CARDIFF DRIVE
TAMPA, FL 33625

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUFSON, JEFFREY E
12403 CARDIFF DRIVE
TAMPA, FL 33625 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: PRES () Delete
Name: SHAW, RALPH D III
Address: 3044 GLEN OAK AVE
City-St-Zip: CLEARWATER, FL 33759 US

Title: VP () Delete
Name: FRITCHER, LEE B
Address: 8711 CHRISTI COURT
City-St-Zip: TAMPA, FL 33637 US

Title: SEC. () Delete
Name: WARENCHAK, STEPHEN
Address: 6106 61ST STREET EAST
City-St-Zip: PALMETTO, FL 34221 US

Title: TRES () Delete
Name: MUFSON, JEFFREY E
Address: 12403 CARDIFF DRIVE
City-St-Zip: TAMPA, FL 33625 US

Title: A.L. () Delete
Name: MOORE, BOB
Address: 18410 LIVINGSTON AVENUE
City-St-Zip: LUTZ, FL 33559

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: MOORE, BOB
Address: 18410 LIVINGSTON AVENUE
City-St-Zip: LUTZ, FL 33559 US

Title: SEC. (X) Change () Addition
Name: KOUTNEY, HOWARD
Address: 802 HEIDI ROAD
City-St-Zip: SEFNER, FL 33584 US

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

Title: S.M. (X) Change () Addition
Name: FRITCHER, LEE
Address: 8711 CHRISTI COURT
City-St-Zip: TAMPA, FL 33637 US

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: JEFFREY E MUFSON

TRES

01/07/2009

Electronic Signature of Signing Officer or Director

Date _____