## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000010860

Entity Name: PASTEL SOCIETY OF TAMPA BAY INC

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business: New	Principal Place of Business:
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1722 HICKORY GATE DR. S. DUNEDIN, FL 34698

**Current Mailing Address: New Mailing Address:** 

1722 HICKORY GATE DR. S. DUNEDIN, FL 34698

FEI Number: 13-4355026 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GAMBLE, GAIL F 1722 HICKORY GATE DR. S. DUNEDIN, FL 34698

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:

Address:

PO BOX 815

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

() Delete GAMBLE, GAIL F POLLOCK, MARY L Name: Name: Address: 1722 HICKORY GATE DR. S. Address: 1557 GLEN HOLLOW LANE NORTH

City-St-Zip: DUNEDIN, FL 34698 US City-St-Zip: DUNEDIN, FL 34698 US

Title: SEC () Delete Title: SEC (X) Change ( ) Addition Name: POLLOCK, MARY LOUISE Name: MORGAN, CATHY Address: Address:

1557 GLEN HOLLOW LANE N. 1196 S. DUNCAN AVE. City-St-Zip: DUNEDIN, FL 34698 US City-St-Zip: CLEARWATER, FL 33756 US

Title: TREA () Delete Title: **TREA** (X) Change ( ) Addition HULSTEIN, ANNEKE BAKER, KAREN Name: Name:

3070 OAK CREEK DR. Address: City-St-Zip: CLEARWATER, FL 33761 US City-St-Zip: SAFETY HARBOR, FL 34695 US

Title: ADV ( ) Delete Title: () Change () Addition

Name: ALLISON, BROOKE Name: Address: 1654 MCKAY CT. Address: City-St-Zip: DUNEDIN, FL 34698 US 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: MARY L. POLLOCK Ρ 03/10/2009