## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N06000010891

Entity Name: TAMPA BAY STEALTH, INC.

FILED Jan 22, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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20910 CEDAR BLUFF PLACE 3501 PARKWAY BLVD

LAND O' LAKES, FL 34638 US LAND O' LAKES, FL 34639 US

Current Mailing Address: New Mailing Address:

20910 CEDAR BLUFF PLACE 3501 PARKWAY BLVD

LAND O' LAKES, FL 34638 US LAND O' LAKES, FL 34639 US

FEI Number: 20-5737178 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:

BRICKHOUSE, STANLEY R

20910 CEDAR BLUFF PLACE

HENDERSON, TIMOTHY J

3501 PARKWAY BLVD

LAND O' LAKES, FL 34638 US LAND O' LAKES, FL 34639 US

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: TIMOTHY J HENDERSON 01/22/2008

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 ( ) Delete
 Title:
 P
 (X) Change ( ) Addition

 Name:
 BRICKHOUSE, STANLEY R
 Name:
 HENDERSON, TIMOTHY J

 Address:
 20910 CEDAR BLUFF PLACE
 Address:
 3501 PARKWAY BLVD

 City-St-Zip:
 LAND O' LAKES, FL 34638 US
 City-St-Zip:
 LAND O' LAKES, FL 34639 US

 Name:
 Name:
 CORNING, JAMES E

 Address:
 Address:
 21142 LAKE VIENNA DR

 City-St-Zip:
 City-St-Zip:
 LAND O' LAKES, FL 34638

Title: V P ( ) Change (X) Addition

 Name:
 Name:
 KOSHIOL, GREG E

 Address:
 Address:
 22410 RED JACKET LANE

 City-St-Zip:
 City-St-Zip:
 LAND O' LAKES, FL 34639

 $\label{eq:time_time_time_time_time} \mbox{Title:} \qquad \mbox{$V$ P$} \qquad \mbox{( ) Delete} \qquad \mbox{Title:} \qquad \mbox{$V$ P$} \qquad \mbox{( ) Change (X) Addition}$ 

 Name:
 Name:
 WARE, RICHARD C

 Address:
 Address:
 22807 HAWK HILL LOOP

 City-St-Zip:
 City-St-Zip:
 LAND O' LAKES, FL 34639

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: TIMOTHY J HENDERSON P 01/22/2008