

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000003882

FILED
Jul 30, 2009
Secretary of State

Entity Name: TAMPA BAY AREA SPORTS OFFICIALS, INC.

Current Principal Place of Business:

417 COUNTRY VINEYARD DR.
VALRICO, FL 33594

New Principal Place of Business:

10115 PALERMO CIRCLE
303
TAMPA, FL 33619

Current Mailing Address:

417 COUNTRY VINEYARD DR.
VALRICO, FL 33594

New Mailing Address:

10115 PALERMO CIRCLE
303
TAMPA, FL 33619

FEI Number: 14-1996853

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LANGLINAIS, CHARLES W II
417 COUNTRY VINEYARD DR
VALRICO, FL 33594 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: CHARLES W. LANGLINAIS, II

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: OFF () Delete
Name: LANGLINAIS, CHARLES W II
Address: 417 COUNTRY VINEYARD DR
City-St-Zip: VALRICO, FL 33594

Title: OFF () Delete
Name: RODRIGUEZ, RONALD
Address: 917 EAGLE LN
City-St-Zip: APOLLO BEACH, FL 33572

Title: OFF (X) Delete
Name: MCCOMAS, SCOTT
Address: 11705 BOYETTE RD. # 444
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OFF (X) Change () Addition
Name: LANGLINAIS, CHARLES W II
Address: 10115 PALERMO CIRCLE, #303
City-St-Zip: TAMPA, FL 33619

Title: OFF (X) Change () Addition
Name: STANLEY, GARY
Address: 3450 PALENCIA DR, #303
City-St-Zip: TAMPA, FL 33618

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: CHARLES W. LANGLINAIS, II

OFF

07/30/2009

Electronic Signature of Signing Officer or Director

Date