2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004807

FILED Mar 19, 2009 Secretary of State

Entity Name: TARPON ALLIANCE FOR HUMANITY, INC.

Current Principal Place of Business: 35246 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 Current Mailing Address: S2446 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 FEI Number: 28-2727426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HENDERSON, TOM 35246 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date					
#209 PALM HARBOR, FL 34684 Current Mailing Address: New Mailing Address: New Mailing Address: New Mailing Address: Name and Address of Use High Way 19 N #209 PALM HARBOR, FL 34684 FEI Number: 28-2727426 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: HENDERSON, TOM 35246 US High Way 19 N #209 PALM HARBOR, FL 34684 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRE Title: () Change () Addition Name: HENDERSON, TOM Name: Address: 35246 US HiGHWAY 19 N City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: Title: () Change () Addition Name: WEBER, PATRICIA Name: WEBER, PATRICIA Name: WEBER, PATRICIA Name: WEBER, PATRICIA Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: () Change () Addition Name: Address: NOTARDONATO, MICHELLE Name: NoTARDON SPRINGS, FL 34689	Current P	Principal Place	of Business:	New Principal Place	of Business:
PALM HARBOR, FL 34684 Current Mailing Address: 35246 US HIGHWAY 19 N #203 PALM HARBOR, FL 34684 FEI Number: 26-2727426 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: HENDERSON, TOM 35246 US HIGHWAY 19 N #203 PALM HARBOR, FL 34684 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent		HIGHWAY 19	N		
35246 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 FEI Number 26-2727426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: HENDERSON, TOM 35246 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date		RBOR, FL 346	84		
#209 PALM HARBOR, FL 34684 FEI Number: 26-2727426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: HENDERSON, TOM 35246 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent	Current Mailing Address:			New Mailing Address:	
FEI Number: 26-2727426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired of Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HENDERSON, TOM 35246 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date		HIGHWAY 19	N		
Name and Address of Current Registered Agent: HENDERSON, TOM 35246 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent		RBOR, FL 346	84		
HENDERSON, TOM 35246 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent	FEI Number	: 26-2727426	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
35246 US HIGHWAY 19 N #209 PALM HARBOR, FL 34684 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent	Name and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
SIGNATURE: Electronic Signature of Registered Agent	35246 US #209	HIGHWAY 19			
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTIVE: () Change () Addition Name: HENDERSON, TOM Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: Title: VP,D () Delete Title: () Change () Addition Name: Name: Name: Name: Address: City-St-Zip: Title: () Change () Addition Name: Name: Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: S () Delete Title: () Change () Addition Name: Address: Title: S () Delete Title: () Change () Addition Name: Name: NoTARDONATO, MICHELLE Address: 12065 PROCTOR LOOP #4			submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: P,D () Delete Name: HENDERSON, TOM Address: 35246 US HIGHWAY 19 N City-St-Zip: PALM HARBOR, FL 34684 Title: VP,D () Delete Name: WEBER, PATRICIA Address: 500 S WALTON AVE City-St-Zip: TARPON SPRINGS, FL 34689 Title: T () Delete Name: VOM EIGEN, CARL Address: 409 WHITCOMB BLVD City-St-Zip: TARPON SPRINGS, FL 34689 Title: S () Delete Name: NOTARDONATO, MICHELLE Address: 12065 PROCTOR LOOP #4 Address: 12065 PROCTOR LOOP #4 Address: 12065 PROCTOR LOOP #4	SIGNATU	RE:			
Title: P,D () Delete Title: () Change () Addition Name: HENDERSON, TOM Name: Address: 35246 US HIGHWAY 19 N Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: Title: VP,D () Delete Title: () Change () Addition Name: WEBER, PATRICIA Name: Address: 500 S WALTON AVE Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: T () Delete Title: () Change () Addition Name: Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: () Change () Addition Name: Address: 409 WHITCOMB BLVD Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, TARPON SPRINGS, TA		Electror	nic Signature of Registered Ag	jent	Date
Name: HENDERSON, TOM Name: Address: 35246 US HIGHWAY 19 N Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip: Title: VP,D () Delete Title: () Change () Addition Name: Address: 500 S WALTON AVE Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: T () Delete Title: () Change () Addition Name: Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: () Change () Addition Name: NOTARDONATO, MICHELLE Name: Address: 12065 PROCTOR LOOP #4 Address:	OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS
Name: WEBER, PATRICIA Name: Address: 500 S WALTON AVE Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: T () Delete Title: () Change () Addition Name: Address: 409 WHITCOMB BLVD Address: City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: S () Delete Title: () Change () Addition Name: Address: 12065 PROCTOR LOOP #4 Address:	Name: Address:	HENDERSON, 35246 US HIGH	TOM IWAY 19 N	Name: Address:	() Change () Addition
Name: VOM EIGEN, CARL Address: 409 WHITCOMB BLVD City-St-Zip: TARPON SPRINGS, FL 34689 City-St-Zip: Title: S () Delete Title: () Change () Addition Name: NOTARDONATO, MICHELLE Address: 12065 PROCTOR LOOP #4 Address:	Name: Address:	WEBER, PATR 500 S WALTON	ICIA I AVE	Name: Address:	() Change () Addition
Name: NOTARDONATO, MICHELLE Name: Address: 12065 PROCTOR LOOP #4 Address:	Name: Address:	VOM EIGEN, C 409 WHITCOM	ARL B BLVD	Name: Address:	() Change () Addition
	Name: Address:	NOTARDONATO 12065 PROCTO	O, MICHELLE DR LOOP #4	Name: Address:	() Change () Addition

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: CARL VOM EIGEN T 03/19/2009