

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009052

FILED
Mar 25, 2008
Secretary of State

Entity Name: CITYBARTER FOUNDATION, INC.

Current Principal Place of Business:

3625 SAN JUAN AVE.
TAMPA, FL 33611

New Principal Place of Business:

512 DARTMOOR ST. APT. 1
ST. PETERSBURG, FL 33701

Current Mailing Address:

3625 SAN JUAN AVE.
TAMPA, FL 33611

New Mailing Address:

PO BOX 385
TAMPA, FL 33601

FEI Number: 26-0873963

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, CELESTE
3625 SAN JUAN AVE.
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

NELSON, CELESTE
512 DARTMOOR ST. APT. 1
ST. PETERSBURG, FL 33701 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: CELESTE E. NELSON

03/25/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCNALLY, MICHAEL
Address: 190 JOCKEY HOLLOW RD.
City-St-Zip: BERNARDSVILLE, NJ 07924

Title: S () Delete
Name: MASHBERG, NANCY
Address: 2 COLUMBIA DR. ROOM FAAST OFFICE 214
City-St-Zip: TAMPA, FL 33606

Title: T () Delete
Name: KOROW, CHRIS
Address: 422 MCGRAW ST.
City-St-Zip: SEATTLE, WA 98109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T (X) Change () Addition
Name: MASHBERG, NANCY
Address: 2 COLUMBIA DR. ROOM FAAST OFFICE 214
City-St-Zip: TAMPA, FL 33606

Title: S (X) Change () Addition
Name: SHAPIRO, ALAN
Address: 7301 5TH AVE. NE SUITE 403
City-St-Zip: SEATTLE, WA 98115

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: CELESTE E. NELSON

REG

03/25/2008

Electronic Signature of Signing Officer or Director

Date