

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011597

FILED
Apr 18, 2008
Secretary of State

Entity Name: TAMPA BAY REGIONAL COALITION, INC.

Current Principal Place of Business:

6107-B MEMORIAL HWY.
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

6107-B MEMORIAL HWY.
TAMPA, FL 33615

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BALDWIN, ANDREA
2918 W. KENNEDY BLVD., STE.201
TAMPA, FL 33609 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROGO, JEFF
Address: 6107-B MEMORIAL HWY.
City-St-Zip: TAMPA, FL 33615

Title: D () Delete
Name: NARKIEWICZ, JOSEPH
Address: 2918 W. KENNEDY BLVD., STE.201
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: BRICKFIELD, NEIL
Address: 3088 HILLSIDE LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: DP (X) Change () Addition
Name: BRICKFIELD, NEIL
Address: 3088 HILLSIDE LANE
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D () Change (X) Addition
Name: GANG, NENA
Address: 6107-B MEMORIAL HWY
City-St-Zip: TAMPA, FL

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: NENA GANG

D

04/18/2008

Electronic Signature of Signing Officer or Director

Date