

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07100

FILED  
Mar 02, 2009  
Secretary of State

Entity Name: TAMIAAMI AMATEUR RADIO CLUB, INC.

## Current Principal Place of Business:

1419 E. MANASOTA BEACH RD.  
ENGLEWOOD, FL 34223 US

## New Principal Place of Business:

## Current Mailing Address:

1419 E. MANASOTA BEACH RD.  
ENGLEWOOD, FL 34223 US

## New Mailing Address:

1419 E. MANASOTA BEACH R.  
ENGLEWOOD, FL 35223 US

FEI Number: 59-2729781

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPROAT, JOHN R  
1419 E. MANASOTA BEACH RD.  
ENGLEWOOD, FL 34223 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: P ( ) Delete  
Name: HAAG, STEWART  
Address: 113 LAPALMA COURT  
City-St-Zip: VENICE, FL 34292

Title: V ( ) Delete  
Name: BROWN, BRUCE  
Address: 841 EAST SEMINOLE DRIVE  
City-St-Zip: VENICE, FL 34293

Title: S ( ) Delete  
Name: SPROAT, JOHN R JR.  
Address: 1419 E. MANASOTA BEACH ROAD  
City-St-Zip: ENGLEWOOD, FL 34223

Title: T ( ) Delete  
Name: JANSEN, DONALD  
Address: 4254 PANDORA ROAD  
City-St-Zip: VENICE, FL 34293

Title: D ( ) Delete  
Name: HAMLET, JON E JR.  
Address: 602 SOUTH CASEY KEY ROAD  
City-St-Zip: NOKOMIS, FL 34275

Title: D ( ) Delete  
Name: AVRUTIK, ROBERT F  
Address: 158 INLETS BOULEVARD  
City-St-Zip: NOKOMIS, FL 34275

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JOHN R. SPROAT, JR.

SECT

03/02/2009

Electronic Signature of Signing Officer or Director

Date