

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001309

FILED
Mar 27, 2009
Secretary of State

Entity Name: TAMPA BAY METRO BUSINESS LEADERSHIP NETWORK, INC.

Current Principal Place of Business:

2908 CAPITAL PARK DRIVE
SUITE A
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

2908 CAPITAL PARK DRIVE
SUITE A
TALLAHASSEE, FL 32301

New Mailing Address:

FEI Number: 83-0505780 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

COURTNEY, DEBORAH
2908 CAPITAL PARK DRIVE
SUITE A
TALLAHASSEE, FL 32301 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: ROSARIO, ANGELA M
Address: 5301 W. CYPRESS STREET, SUITE 200
City-St-Zip: TAMPA, FL 33607

Title: VP () Delete
Name: RUBY-WHITE, RUBY
Address: 401 E. JACKSON STREET, 10TH FLOOR
City-St-Zip: TAMPA, FL 33602

Title: S/T () Delete
Name: LIMBACH, DANI
Address: 3605 E. BOUGANVILLEA AVENUE
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: RUBY-WHITE, RUBY
Address: 401 E. JACKSON STREET, 10TH FLOOR
City-St-Zip: TAMPA, FL 33602

Title: VP (X) Change () Addition
Name: HABER, BOB
Address: 2900 BAYPORT DRIVE
City-St-Zip: TAMPA, FL 33607

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: DANI LIMBACH

S/T

03/27/2009

Electronic Signature of Signing Officer or Director

_____ Date