

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001635

FILED
May 29, 2009
Secretary of State

Entity Name: TAMPA BAY BOATING ASSOCIATION, INC.

Current Principal Place of Business:

626 SOMERSTONE DR
VALRICO, FL 33594

New Principal Place of Business:

Current Mailing Address:

626 SOMERSTONE DR
VALRICO, FL 33594

New Mailing Address:

FEI Number: 26-1984988 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

VAYALUMKAL, FRANCIS S
626 SOMERSTONE DR
VALRICO, FL 33594 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: VAYALUMKAL, FRANCIS S
Address: 626 SOMERSTONE DR
City-St-Zip: VALRICO, FL 33594

Title: T () Delete
Name: MATHEW, JOLLY
Address: 1202 GOLF MEADOW BLVD
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: OUSEPH, SHAJU P
Address: 7804 RIVERWOOD OAKS DR
City-St-Zip: RIVERVIEW, FL 33569

Title: D () Delete
Name: JOSEPH, THOMAS
Address: 1717 POWDER RIDGE DR
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: SIMON, TOMY
Address: 1718 ERIN BROOKE DR
City-St-Zip: VALRICO, FL 33594

Title: D () Delete
Name: GEORGE, ABRAHAM
Address: 6145 LANSHIRE DR
City-St-Zip: TAMPA, FL 33634

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:

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: FRANCIS VAYALUMKAL

PRES

05/29/2009

Electronic Signature of Signing Officer or Director

Date