2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005840

Entity Name: TRI-CITY PIRANHAS INC.

FILED Jan 08, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

390 112TH AVE NORTH 3411 UMBER RD 7308 HOLIDAY, FL 34691

ST.PETERSBURG, FL 33716

Current Mailing Address: New Mailing Address:

390 112TH AVE NORTH 3411 UMBER RD HOLIDAY, FL 34691

ST.PETERSBURG, FL 33716

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BALL, CALVIN JR EFFLER, STEVE

390 112TH AVE NORTH 3350 WEST HILLSSBOROUGH

7308 APT 324

ST.PETERSBURG, FL 33716 US TAMPA, FL 33634 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: STEVE EFFLER 01/08/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: CEO () Delete Title: CEO (X) Change () Addition

 Name:
 BALL, CALVIN JR
 Name:
 COLLINS, CORNELIUS

 Address:
 390 112TH AVE NORTH APT#7308
 Address:
 321 DAVID AVE

City-St-Zip: ST.PETERSBURG, FL 33716 City-St-Zip: CLEARWATER, FL 33759

Title: P () Delete Title: P (X) Change () Addition

Name: SIMONCINI, JOSEPH Name: EFFLER, STEVE

Address: 11601 4TH ST NORTH APT#209 Address: 3350 WEST HILLSBOROUGH APT324

City-St-Zip: ST.PETERSBURG, FL 33716 City-St-Zip: TAMPA, FL 33634

 $\label{eq:title:power} \mbox{Title:} \qquad \mbox{VP} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{P} \qquad \mbox{(X) Change () Addition}$

 Name:
 TYSON, TRAVIS
 Name:
 BATTEN, LAHAF D

 Address:
 12001 BELCHER RD .SOUTH
 Address:
 3411 UMBER RD

 City-St-Zip:
 LARGO, FL 33773
 City-St-Zip:
 HOLIDAY, FL 34691

Title: VP (X) Delete Title: () Change () Addition

Name: EFFLER, STEVE Name:

 Address:
 3350 WEST HILLSBOROUGH APT#324
 Address:

 City-St-Zip:
 TAMPA, FL 33634
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 COLLINS, CORNELIUS
 Name:

 Address:
 321 DAVID AVE
 Address:

 City-St-Zip:
 CLEARWATER, FL 33759
 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

 Name:
 BATTEN, LAHAF
 Name:
 BATTEN, LAHAF

 Address:
 321 DAVID AVE
 Address:
 3411 UMBER RD

 City-St-Zip:
 CLEARWATER, FL 33759
 City-St-Zip:
 HOLIDAY, FL 34691

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: LAHAF BATTEN P 01/08/2009