2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08197

FILED Apr 30, 2009 Secretary of State

Entity Name: TAMPA BAY SOARING SOCIETY, INC.

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

40223 SUN PATH AVE ZEPHYRHILLS, FL 33540

Current Mailing Address: New Mailing Address:

1120 E KENNEDY BLVD 1430 TAMPA, FL 33602

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:

PATTON, BRUCE E 1120 E KENNEDY BLVD 1430 TAMPA, FL 33602 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:

Clastera is Cinneting of Decistors of August

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: VPD (X) Change () Addition Name: SUTTON, RON Name: SUTTON, RON

 Name:
 SUTTON, RON
 Name:
 SUTTON, RON

 Address:
 9818 DIDFTIKSON AVE
 Address:
 9818 DIDFTIKSON AVE

 City-St-Zip:
 NEW PORT RICHEY, FL 34655
 City-St-Zip:
 NEW PORT RICHEY, FL 34655

 Name:
 THOMASSON, DON
 Name:
 THOMASSON, DON

 Address:
 509 55TH AVE
 Address:
 509 55TH AVE

City-St-Zip: ST. PETE BCH, FL 33706 City-St-Zip: ST. PETE BCH, FL 33706

Title: SD () Delete Title: () Change () Addition

 Name:
 RIERSON, ROB
 Name:

 Address:
 9012 NOTCHWOOD COURT
 Address:

 City-St-Zip:
 ORLANDO, FL 32825
 City-St-Zip:

 Name:
 PATTON, BRUCE E
 Name:

 Address:
 1120 E KENNEDY BLVD
 Address:

 City-St-Zip:
 TAMPA, FL 33602
 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: BRUCE E PATTON TD 04/30/2009