

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000002765

FILED  
Jan 10, 2010  
Secretary of State

Entity Name: PIT STOP BULLYS, INC

## Current Principal Place of Business:

10504 N OTIS AVE  
TAMPA, FL 33612

## New Principal Place of Business:

4312 THONOTOSASSA RD  
PLANT CITY, FL 33565

## Current Mailing Address:

PO BOX 280260  
TAMPA, FL 33682

## New Mailing Address:

FEI Number: 26-4060789

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BURKE, ASHLIE M  
10504 N OTIS AVE  
TAMPA, FL 33612 US

## Name and Address of New Registered Agent:

BURKE, ASHLIE M  
4312 THONOTOSASSA RD  
PLANT CITY, FL 33565 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:

01/10/2010

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: BURKE, ASHLIE M  
Address: 4312 THONOTOSASSA RD  
City-St-Zip: PLANT CITY, FL 33565

Title: VP  
Name: MILLER, KIM A  
Address: 6237 5TH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: VP  
Name: MILLER, JOEL B  
Address: 6237 5TH AVENUE NORTH  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: T  
Name: MEADE, MARGARET H  
Address: 14909 BALSABWOOD PL  
City-St-Zip: TAMPA, FL 33613

Title: S  
Name: EWING, DIANDRA M  
Address: 15010 RADCLIFF DRIVE  
City-St-Zip: TAMPA, FL 33625

I hereby 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 all other like empowered.

SIGNATURE: ASHLIE M. BURKE

P

01/10/2010

Electronic Signature of Signing Officer or Director

Date