2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17127

FILED Feb 10, 2009 Secretary of State

Entity Name: THE YBOR CITY ROUND TABLE, INC.

Current Principal Place of Business: New Principal Place of Business: 4609 N. EDDY DR. TAMPA, FL 33603 US **Current Mailing Address: New Mailing Address:** PO BOX 75774 TAMPA, FL 33675 US FEI Number: 59-2997601 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CALDEVILLA, JOSÉ R TREAS 4609 N. EDDÝ DR. TAMPA, FL 33603 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** () Change () Addition () Delete SPICOLA, ANGELO C Name: Name: 13815 CHANDRON DRIVE Address: Address: City-St-Zip: ODESSA, FL 33556 US City-St-Zip: Title: () Delete Title: (X) Change () Addition ODIERES-FERNANDEZ, HILDA Name: GARRIGA, EDUARDO Name: Address: 2909 W. BARCELONA ST., STE #610 Address: 6005 N. BLOSSOM AVE City-St-Zip: TAMPA, FL 33629 US City-St-Zip: TAMPA, FL 33614 US Title: 2VP () Delete Title: CSEC (X) Change () Addition SEDITA, JOSEPH SEDITA, CONNIE Name: Name: 6625 BAYBROOKS CIRCLE Address: Address: 6625 BAYBROOKS CIRCLE City-St-Zip: TEMPLE TARRACE, FL 33617 US City-St-Zip: TEMPLE TERRACE, FL 33617 US (X) Change () Addition Title: CSEC () Delete Title: **RSEC** SEDITA, CONNIE Name: Name: GOKEY, LOIS R 6625 BAYBROOKS CIRCLE Address: Address: 8870 N. HIMES AVE #213 City-St-Zip: TEMPLE TERRACE, FL 33617 US City-St-Zip: TAMPA, FL 33614-162 US Title: **RSEC** () Delete Title: (X) Change () Addition GOKEY, KOIS CALDEVILLA, JOSE R Name: Name: 7105 N. COARSEY DRIVE 4609 N. EDDY DR. Address: Address: City-St-Zip: TAMPA, FL 33604 US City-St-Zip: TAMPA, FL 33603 US Title: TREA (X) Delete Title: () Change () Addition CALDEVILLA, JOSÉ R Name: Name: Address: 4609 N. EDDY DR. Address: TAMPA, FL 33603 US City-St-Zip: 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: JOSE R. CALDEVILLA TREA 02/10/2009