

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20694

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: TAMPA BAY SKATING CLUB, INC.

## Current Principal Place of Business:

255 FOREST LAKES BLVD.  
OLDSMAR, FL 34677 US

## New Principal Place of Business:

## Current Mailing Address:

255 FOREST LAKES BLVD.  
OLDSMAR, FL 34677 US

## New Mailing Address:

FEI Number: 59-2822618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCNAMARA, PATRICK  
101 E. KENNEDY BLVD SUITE 3400  
ATTN: AT LAW #2350  
TAMPA, FL 336012350 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: PD ( ) Delete  
Name: EDENS, LYN  
Address: 469 OLD OAK CIRCLE  
City-St-Zip: PALM HARBOR, FL

Title: T ( ) Delete  
Name: RIEKOFSKI, KERRY W  
Address: 408 LIAM AVE.  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: SD ( ) Delete  
Name: TUXHORN, TEREASA  
Address: 2030 CASTILLE DRIVE  
City-St-Zip: DUNEDIN, FL 34698

Title: VPD ( ) Delete  
Name: MCNAMARA, PATRICK K  
Address: 5803 GOROON AVE.  
City-St-Zip: TAMPA, FL 33611

Title: 2VP ( ) Delete  
Name: BEALL, MICHAEL  
Address: 1487 SADDLE WEST  
City-St-Zip: PALM HARBOR, FL 34683

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: NIELSEN, TERESA  
Address: 10031 CEDAR DUNE DRIVE  
City-St-Zip: TAMPA, FL 33624

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: TUXHORN, TERESA  
Address: 2030 CASTILLE DRIVE  
City-St-Zip: DUNEDIN, FL 34698

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: KERRY W. RIEKOFSKI

T

03/09/2009

Electronic Signature of Signing Officer or Director

Date