

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22914

FILED  
Jul 07, 2008  
Secretary of State

Entity Name: FRIENDS OF TAMPA DAY SCHOOL, INC.

## Current Principal Place of Business:

12606 HENDERSON RD.  
TAMPA, FL 33625 US

## New Principal Place of Business:

## Current Mailing Address:

12606 HENDERSON RD.  
TAMPA, FL 33625 US

## New Mailing Address:

FEI Number: 59-2856698      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

MOWATT-GREENE, ANDREA M  
15104 SHAW ROAD  
TAMPA, FL 33625 US

## Name and Address of New Registered Agent:

MULLARKEY, TJ  
12606 HENDERSON RD.  
TAMPA, FL 33625 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: TJ MULLARKEY

07/07/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: AZNEER, MARIANNE  
Address: 2206 CYPRESS HOLLOW CT  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: V ( ) Delete  
Name: STERLING, FRAN  
Address: 12433 RUSTIC VIEW  
City-St-Zip: TAMPA, FL 33635

Title: S (X) Delete  
Name: NIELSON, FAY  
Address: 390 COFFEE POT RIVIERA NE  
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: T (X) Delete  
Name: ANDERSON, DIANE F  
Address: 11904 NICKLAUS CIR  
City-St-Zip: TAMPA, FL 33624

Title: V ( ) Delete  
Name: JESSON, JERI  
Address: 4904 LYFORD CAY ROAD  
City-St-Zip: TAMPA, FL 33629

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change ( ) Addition  
Name: MURPHY, MINDY  
Address: 3917 SNAPPER POINTE DR.  
City-St-Zip: TAMPA, FL 33611

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

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: MARIANNE AZNEER

P

07/07/2008

Electronic Signature of Signing Officer or Director

Date