

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24866

FILED
Jan 22, 2009
Secretary of State

Entity Name: TUTTEROW STARS OF TOMORROW, INC.

Current Principal Place of Business:

452 5TH AVE SE
LARGO, FL 33771 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 650
LARGO, F 33779 US

New Mailing Address:

FEI Number: 59-2871199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEDY, DEBBIE
452 5TH AVE SE
LARGO, FL 33771 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: P () Delete
Name: WEISICKLE, LISA
Address: 1344 STRATFORD STREET NORTH
City-St-Zip: CLEARWATER, FL 33756

Title: VP () Delete
Name: FALONE, ROBIN
Address: 10934 117TH STREET NORTH
City-St-Zip: SEMINOLE, FL 33778

Title: S () Delete
Name: GELDERLOOS, PAT
Address: 712 KNOLLWOOD DRIVE
City-St-Zip: LARGO, FL 33770

Title: T () Delete
Name: MORRIS, GINNY
Address: 9046 130TH WAY NORTH
City-St-Zip: SEMINOLE, FL 33776

Title: D () Delete
Name: KENNEDY, DEBBIE
Address: 452 5TH AVE SE
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: BEAMER, MANDY
Address: 6501 CEDARBROOK DRIVE
City-St-Zip: PINELLAS PARK, FL 33782

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORRIS, GINNY
Address: 9046 - 130TH WAY
City-St-Zip: SEMINOLE, FL 33776

Title: VP (X) Change () Addition
Name: WHITE, CONNIE
Address: 12990 - 90TH AVE N
City-St-Zip: SEMINOLE, FL 33776

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

Title: T (X) Change () Addition
Name: FALONE, ROBIN
Address: 10934 - 117TH ST N
City-St-Zip: SEMINOLE, FL 33778

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: ROBIN FALONE

T

01/22/2009

Electronic Signature of Signing Officer or Director

Date