

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25958

FILED
Jan 08, 2007
Secretary of State

Entity Name: GAUCHO ASSOCIATION OF TAMPA, INC.

Current Principal Place of Business:

8313 TERRACEWOOD CIRCLE
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

8313 TERRACEWOOD CIRCLE
TAMPA, FL 33615

New Mailing Address:

FEI Number: 59-2894894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

VONDRAK, JAMES W
8313 TERRACEWOOD CIRCLE
TAMPA, FL 33615 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: DP () Delete
Name: VANCE, R. DOUGLAS,
Address: 3303 LA HABRA COURT
City-St-Zip: TAMPA, FL

Title: DV () Delete
Name: MATCHUS, DAVID B.,
Address: 16004 WYNDOVER ROAD
City-St-Zip: TAMPA, FL

Title: DST () Delete
Name: VONDRAK, JAMES W.,
Address: 8313 TERRACEWOOD CIRCLE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: ALVAREZ, DANIEL J.,
Address: 15539 WOODWAY DR.
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: FLOYD, ROBERT D.,
Address: 3304 LA HABRA COURT
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: GREENE, STUART L.,
Address: 3155 LAKE ELLEN DRIVE
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D (X) Change () Addition
Name: GREENE, STUART L.,
Address: 14678 VILLAGE GLEN CIRCLE
City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES W. VONDRAK

DST

01/08/2007

Electronic Signature of Signing Officer or Director

Date