

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27443

FILED
Apr 21, 2008
Secretary of State

Entity Name: TAMPA AREA ROMANCE AUTHORS, INC.

Current Principal Place of Business:

5233 BAYSHORE BLVD
TAMPS, FL 33611 US

New Principal Place of Business:

Current Mailing Address:

5233 BAYSHORE BLVD
TAMPA, FL 33611 US

New Mailing Address:

FEI Number: 74-2529240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASON, JEAN
5233 BAYSHORE BLVD
TAMPA, FL 33611 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: WILSON, CHERYL
Address: 7920 209TH ST E
City-St-Zip: BRADENTON, FL 34202

Title: V () Delete
Name: MANSFIELD, CHERYL
Address: PO BOX 26174
City-St-Zip: TAMPA, FL 33623

Title: S () Delete
Name: MAINGER, DEBBIE
Address: 8511 N. TEMPLE AVE
City-St-Zip: TAMPA, FL 33617

Title: T () Delete
Name: MASON, JEAN
Address: 5233 BAYSHORE BLVD
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: LANE, VICKI
Address: 6440 5TH AVENUE
City-St-Zip: ST. PETERSBURG, FL 33710

Title: S (X) Change () Addition
Name: FREEBOURN, AMANDA
Address: 10814 WINDBURY WAY
City-St-Zip: RIVERVIEW, FL 33569

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: JEAN MASON

T

04/21/2008

Electronic Signature of Signing Officer or Director

_____ Date