

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28180

FILED
Feb 17, 2009
Secretary of State

Entity Name: TAMPA ADVERTISING CO-OP, INC.

Current Principal Place of Business:

C/O HEWITT CHARTERED
1211 N WESTSHORE BLVD, STE 411
TAMPA, FL 33607 US

New Principal Place of Business:

Current Mailing Address:

C/O HEWITT CHARTERED
P.O. BOX 21463
TAMPA, FL 336221463 US

New Mailing Address:

FEI Number: 59-2927315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARY GYARMATHY
13180 N. CLEVELAND AVE.
FORT MYERS, FL 33903 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: T () Delete
Name: PHILLIPS, MARTIN
Address: 5411 SANDS POINT DRIVE
City-St-Zip: LAKELAND, F 33809

Title: D () Delete
Name: IVEY, DAVID
Address: 17409 EQUESTRIAN TR.
City-St-Zip: ODESSA, FL 33556

Title: D () Delete
Name: ROBERTS, JOHN
Address: 12609 SELAH RANCH LANE
City-St-Zip: THONOTOSASSA, FL 33592

Title: P () Delete
Name: SEEFELDT, DALE
Address: TWO CONCOURSE PARKWAY, STE 270
City-St-Zip: ATLANTA, GA 30326

Title: D () Delete
Name: BRIDGMAN, JR., ULYSSES
Address: 1903 STANLEY GAULT PARKWAY
City-St-Zip: LOUISVILLE, KY 40223

Title: D () Delete
Name: BANNING, GEORGE
Address: 1910 W MEMORIAL DR
City-St-Zip: LAKELAND, FL 33801

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: () 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: C LEE HEWITT

CPA

02/17/2009

Electronic Signature of Signing Officer or Director

Date