## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N33339

Entity Name: TAMPA BAY HARVEST, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:	<b>New Principal Place of Business:</b>
--------------------------------------	---

13620 49TH STREET N CLEARWATER, FL 33762 US

Current Mailing Address: New Mailing Address:

30798 US HIGHWAY 19 NORTH PALM HARBOR, FL 34684 US

FEI Number: 59-2981815 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CARTAGENA, RICHARD A 30798 US HIGHWAY 19 NORTH PALM HARBOR, FL 34684 US

**OFFICERS AND DIRECTORS:** 

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

## 0 0

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:DPC ( ) DeleteTitle:PRES (X) Change ( ) AdditionName:MITCHELL, STEPHEN LName:GONZALES, RICHARDAddress:101 OAK AVENUEAddress:16012 5TH STREET EASTCity-St-Zip:PALM HARBOR, FL 34684City-St-Zip:REDINGTON BEACH, FL 33708

Title: DV ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 JENSEN, NAN
 Name:
 KEYES, JAY F

 Address:
 403 HARBOR DR SOUTH
 Address:
 100 DEVON DRIVE

City-St-Zip: INDIAN ROCKS BEACH, FL 33785 City-St-Zip: CLEARWATER BEACH, FL 33767

Title: DTS ( ) Delete Title: ( ) Change ( ) Addition

Name: CARTAGENA, RICHARD A Name:

Address: 30798 UNITED STATES HIGHWAY 19 NORTH Address: City-St-Zip: PALM HARBOR, FL 34684 City-St-Zip:

Title: ( ) Delete Title: SD ( ) Change (X) Addition

 Name:
 MITCHELL, STEPHEN L

 Address:
 Address:
 2042 NORFOLK DR.

 City-St-Zip:
 City-St-Zip:
 HOLIDAY, FL 34691

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: STEPHEN L. MITCHELL DS 04/29/2009