

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33535

FILED  
Jan 04, 2008  
Secretary of State

**Entity Name:** AMERICAN CULINARY FEDERATION TAMPA BAY CULINARY ASSOCIATION, INC.

**Current Principal Place of Business:**

15123 NIGHTHAWK DRIVE  
TAMPA, FL 33625 US

**New Principal Place of Business:**

**Current Mailing Address:**

15123 NIGHTHAWK DRIVE  
TAMPA, FL 33625 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

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

LUCARDIE, FREDERIK J  
15123 NIGHTHAWK DRIVE  
TAMPA, FL 33625 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: CD ( ) Delete  
Name: LUCARDIE, FREDERIK J  
Address: 15123 NIGHTHAWK DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: PD ( ) Delete  
Name: ROOKSBERRY, JOSEPH A  
Address: 7304 CANAL BOULEVARD  
City-St-Zip: TAMPA, FL 33615

Title: VP ( ) Delete  
Name: SABO, MICHAEL J  
Address: 10635 FIREBRICK COURT  
City-St-Zip: TRINITY, FL 34655

Title: T ( ) Delete  
Name: BOLDUC, KENNETH R  
Address: 7815 LEIGHTON CIRCLE  
City-St-Zip: NEW PORT RICHEY, FL 34654

Title: S ( ) Delete  
Name: EVANS, PAUL M JR  
Address: 13241 PRESTWICK DRIVE  
City-St-Zip: RIVERVIEW, FL 33569

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LUCARDIE, FREDERIK J  
Address: 15123 NIGHTHAWK DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: CD (X) Change ( ) Addition  
Name: ROOKSBERRY, JOSEPH A  
Address: 7304 CANAL BOULEVARD  
City-St-Zip: TAMPA, FL 33615

Title: VP (X) Change ( ) Addition  
Name: PRIOLA, MICHAEL  
Address: 405 SOUTH OAKWOOD  
City-St-Zip: BRANDON, FL 33511

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: FREDERIK J. LUCARDIE

PD

01/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date