

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34826

FILED
Feb 06, 2009
Secretary of State

Entity Name: TAMPA BAY VIZSLA CLUB, INC.

Current Principal Place of Business:

C/O JENNIFER HERMES
7601 S. SHAMROCK RS
TAMPA, FL 33616

New Principal Place of Business:

C/O DAVID JOHNSON
5319 21ST AVENUE, NORTH
ST. PETERSBURG, FL 33710

Current Mailing Address:

C/O JENNIFER HERMES
7601 S. SHAMROCK RS
TAMPA, FL 33616

New Mailing Address:

C/O DAVID JOHNSON
5319 21ST AVENUE, NORTH
ST. PETERSBURG, FL 33710

FEI Number: 65-0152961

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERMES, JENNIFER
7601 S. SHAMROCK RD
TAMPA, FL 33616 US

Name and Address of New Registered Agent:

JOHNSON, DAVID E
5319 21ST AVENUE, NORTH
ST. PETERSBURG, FL 33710 US

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: DAVID E. JOHNSON

02/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CS () Delete
Name: MANGOLD, KATHY
Address: 5960 MORNINGSIDE DR.
City-St-Zip: LAKE WORTH, FL 33463

Title: D () Delete
Name: BONNICE, DON
Address: PO BOX 1218
City-St-Zip: SAN ANTONIO, FL 33576

Title: VP () Delete
Name: DAUGHERTY, STEPHANIE
Address: PO BOX 26
City-St-Zip: HOWIE-IN-THE-HILLS, FL 34737

Title: P () Delete
Name: SHRAMKO, PATRICE
Address: 905 SE 4TH STREET
City-St-Zip: BOYNTON BEACH, FL 33435

Title: T () Delete
Name: JOHNSON, DAVID
Address: 5319 21ST AVE N.
City-St-Zip: ST. PETERSBURG, FL 33710

Title: RS () Delete
Name: HERMES, JENNIFER
Address: 7601 S. SHAMROCK
City-St-Zip: TAMPA, FL 33616

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: ANDERSON, BETTY
Address: 5900 28TH AVENUE DRIVE, EAST
City-St-Zip: BRADENTON, FL 34208

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: RS (X) Change () Addition
Name: HART, PATTY
Address: 23521 N.W. COUNTY ROAD 239
City-St-Zip: ALACHUA, FL 32615

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: DAVID E JOHNSON

TREA

02/06/2009

Electronic Signature of Signing Officer or Director

Date