2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39433

FILED Feb 26, 2009 Secretary of State

Entity Name: THE TAMPA BAY ADVERTISING FEDERATION, INC.

Current Principal Place of Business: New Principal Place of Business: 11812 N 56TH ST TAMPA, FL 33617 US **Current Mailing Address: New Mailing Address:** 11812 N 56TH ST TAMPA, FL 33617 US FEI Number: 59-3072029 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: JEFFCOAT, SARAH 11812 N 56TH STREET TAMPA, FL 33617 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete QUIGLEY, MICHAEL NEUMAN, CRAIG Name: Name: 16036 US HIGHWAY 19 NORTH Address: 10441 HALLMARK BLVD Address: City-St-Zip: CLEARWATER, FL 33764 US City-St-Zip: RIVERVIEW, FL 33569 US Title: () Delete Title: (X) Change () Addition NEUMAN, CRAIG Name: DAVIS KINKEAD, SHERRIE Name: Address: 10441 HALLMARK BLVD Address: 1241 ROYAL OAK DR. City-St-Zip: RIVERVIEW, FL 33569 US City-St-Zip: DUNEDIN, FL 33765 US Title: MD () Delete Title: () Change () Addition JEFFCOAT, SARAH Name: Name: Address: 11812 N 56TH STREET Address: City-St-Zip: TAMPA, FL 33617 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: ANDERSEN, MICHAEL Name: Address: 11575 47TH ST N Address: City-St-Zip: CLEARWATER, FL 33672 US City-St-Zip: Title: () Delete Title: () Change () Addition CHRISTMAN, HEATHER Name: Name: 10263 GANDY BLVD., UNIT 602 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33702 US City-St-Zip: Title: () Delete Title: (X) Change () Addition PAKSOY, NICOLE PAKSOY, NICOLE Name: Name: Address: 1515 N WESTSHORE BLVD Address: 5201 W KENNEDY BLVD., STE. 600 TAMPA, FL 33607 US TAMPA, FL 33609 US City-St-Zip: 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: SARAH JEFFCOAT MD 02/26/2009