

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41355

FILED  
Apr 30, 2010  
Secretary of State

**Entity Name:** TAMPA BAY ASSOCIATION FOR FINANCIAL PROFESSIONALS, INC.

**Current Principal Place of Business:**

15526 NEWPORT ROAD  
CLEARWATER, FL 33764 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 21525  
TAMPA, FL 33622 US

**New Mailing Address:**

FEI Number: 59-3072469

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOONE, DARRELL  
15526 NEWPORT ROAD  
CLEARWATER, FL 33764 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: DP  
Name: WERNER, MARY  
Address: 3554 MUNNINGS KNOLL  
City-St-Zip: LAND O'LAKES, FL 34639

Title: DV  
Name: PARDUM, WILLIAM  
Address: C/O TGH, P O BOX 1289  
City-St-Zip: TAMPA, FL 33604

Title: DT  
Name: BOONE, DARRELL  
Address: 15526 NEWPORT ROAD  
City-St-Zip: CLEARWATER, FL 33764

Title: DS  
Name: JONES, RENEE  
Address: 360 CENTRAL AVE. C/O BBT  
City-St-Zip: ST. PETERSBURG, FL 33701

I hereby 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 all other like empowered.

SIGNATURE: DARRELL BOONE

DT

04/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date