

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45703

FILED
Apr 23, 2010
Secretary of State

Entity Name: TARPON SPRINGS SPONSORS CLUB, INC.

Current Principal Place of Business:

321 HIGH STREET
TARPON SPRINGS, FL 34689

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 102
TARPON SPRINGS, FL 346880102

New Mailing Address:

FEI Number: 59-3095072 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

AIDE, JOHN E
321 HIGH STREET
TARPON SPRINGS, FL 34689 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: PD
Name: STEPHEN, HERB PRES.
Address: 90 CANAL DR. SOUTH
City-St-Zip: PALM HARBOR, FL 34684 US

Title: VPD
Name: WIKLE, PAUL V.P.
Address: 33 CENTRAL COURT
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: STD
Name: AIDE, JOHN E SEC/TR
Address: 321 HIGH STREET
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: PPD
Name: KARAY, ANDY P. PRES
Address: 1523 KISH DR.
City-St-Zip: TRINITY, FL 34655 US

Title: D
Name: AIDE, DAVID DIR.
Address: 1538 RIVERSIDE DR.
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: D
Name: WEISKOPF, DAN DIR.
Address: 160 E. LEMON ST.
City-St-Zip: TARPON SPRINGS, FL 34689 US

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: JOHN E. AIDE

STD

04/23/2010

Electronic Signature of Signing Officer or Director

Date