

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47732

FILED
Jan 22, 2009
Secretary of State

Entity Name: GOLD CUP TARPON TOURNAMENT, INC.

Current Principal Place of Business:

POST OFFICE BOX 1705
ISLAMORADA, FL 33036 US

New Principal Place of Business:

80910 OVERSEAS HWY.
ISLAMORADA, FL 33036 US

Current Mailing Address:

POST OFFICE BOX 1705
ISLAMORADA, FL 33036 US

New Mailing Address:

FEI Number: 65-0423211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMBROGIO, CHARLOTTE
80910 OVERSEAS HIGHWAY
P.O. BOX 1063
ISLAMORADA, FL 33036 US

Name and Address of New Registered Agent:

AMBROGIO, CHARLOTTE
80910 OVERSEAS HIGHWAY
ISLAMORADA, FL 33036 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: CHARLOTTE AMBROGIO

01/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CRISCOLA, MIKE
Address: P.O. BOX 1705
City-St-Zip: ISLAMORADA, FL 33036

Title: TD () Delete
Name: AMBROGIO, CHARLOTTE
Address: P.O. BOX 1705
City-St-Zip: ISLAMORADA, FL 33036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHARLOTTE AMBROGIO

D

01/22/2009

Electronic Signature of Signing Officer or Director

Date