2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State
04-14-2008 90023 004 ****61.25

DOCUMENT # N48110

1. Entity Name
TAMPA FRIENDS OF OLD TIME DANCE, INC.

Principal Place of Business	Mailing Address
P O BOX 21511 ST. PETERSBURG, FL 33742	P O BOX 21511 ST. PETERSBURG, FL 33742

03152008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
330 BAYVIEW DR NE	PO Box 21511
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ST. PETERSBURG, FL	City & State: ST. PETERSBURG, FL
Zip: 337	Country: PINELLAS
	Zip: 2151
	Country: PINELLAS

4. FEI Number: 59-3115966 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PRINCE, STANLEY 330 BAYVIEW DR N.E. ST. PETERSBURG, FL 33704	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25 Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	TD ☐ Delete	TITLE	P ☑ Change ☐ Addition
NAME	PRINCE, STANLEY	NAME	PRINCE, STANLEY
STREET ADDRESS	330 BAYVIEW DR N.E.	STREET ADDRESS	330 BAYVIEW DR NE
CITY-ST-ZIP	ST PETERSBURG, FL 33704	CITY-ST-ZIP	ST PETERSBURG, FL 33704
TITLE	SD ☐ Delete	TITLE	S ☑ Change ☐ Addition
NAME	LASTRAPES, TOM	NAME	LASTRAPES, TOM
STREET ADDRESS	6050 86TH AVE	STREET ADDRESS	6050 86TH AVE
CITY-ST-ZIP	PINELLAS PARK, FL 33782	CITY-ST-ZIP	PINELLAS PARK, FL 33782
TITLE	PD ☐ Delete	TITLE	T ☑ Change ☐ Addition
NAME	PRINCE, LINDA	NAME	PRINCE, LINDA
STREET ADDRESS	330 BAYVIEW DR NE	STREET ADDRESS	330 BAYVIEW DR NE
CITY-ST-ZIP	SAINT PETERSBURG, FL 33704	CITY-ST-ZIP	ST PETERSBURG, FL 33704
TITLE	VD ☐ Delete	TITLE	V ☑ Change ☐ Addition
NAME	MCGEEHAN, BOB	NAME	MCGEEHAN, LINDA
STREET ADDRESS	3098 ROBERTA ST	STREET ADDRESS	3098 ROBERTA ST
CITY-ST-ZIP	LARGO, FL 33771	CITY-ST-ZIP	LARGO, FL 33771
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stanley R. Prince 3/15/08 727-823-2725
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #