

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49890

FILED
Apr 21, 2009
Secretary of State

Entity Name: YE LOYAL KREWE OF GRACE O'MALLEY, INC.

Current Principal Place of Business:

TASHIA M DIAZ
3618 W CLEVELAND STREET
TAMPA, FL 33609 US

New Principal Place of Business:

Current Mailing Address:

TASHIA M DIAZ
3618 W CLEVELAND STREET
TAMPA, FL 33609 US

New Mailing Address:

FEI Number: 59-3132686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIAZ, TASHIA
3618 W CLEVELAND STREET
TAMPA, FL 33609 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: P () Delete
Name: HEID, PAT
Address: 408 INVERNESS AVE
City-St-Zip: TAMPA, FL 33617

Title: VP () Delete
Name: WAKEFIELD, HEATHER
Address: 13340 MORAN DRIVE
City-St-Zip: TAMPA, FL 33618

Title: T () Delete
Name: DIAZ, TASHIA
Address: 3618 W CLEVELAND STREET
City-St-Zip: TAMPA, FL 33609

Title: AT () Delete
Name: HOGAN, KAREN
Address: 440 CAPRI BLVD
City-St-Zip: TREASURE ISLAND, FL 33706

Title: S () Delete
Name: FLOYD, KELLY
Address: 18140 PARADISE POINT DRIVE
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WAKEFIELD, HEATHER
Address: 13340 MORAN DRIVE
City-St-Zip: TAMPA, FL 33618

Title: VP (X) Change () Addition
Name: DIAZ, TASHIA
Address: 3618 W CLEVELAND STREET
City-St-Zip: TAMPA, FL 33609

Title: T (X) Change () Addition
Name: HOGAN, KAREN
Address: 440 CAPRI BLVD
City-St-Zip: TREASURE ISLAND, FL 33706

Title: AT (X) Change () Addition
Name: JONES, JOY
Address: 4702 W IOWA ST
City-St-Zip: TAMPA, FL 33716

Title: S (X) Change () Addition
Name: FOREID, PAM
Address: 2609 HEATHERWOOD DR
City-St-Zip: TAMPA, FL 33618

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: TASHIA M DIAZ

VP

04/21/2009

Electronic Signature of Signing Officer or Director

Date