2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000637

Entity Name: TAMPA BAYWATCH, INC.

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3000 PINELLAS BAYWAY SOUTH TIERRA VERDE, FL 33715 **Current Mailing Address: New Mailing Address:** 3000 PINELLAS BAYWAY SOUTH TIERRA VERDE, FL 33715 FEI Number: 59-3191962 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CLARK, PETER A 2950 PINELLAS BAYWAY SOUTH TIERRA VERDE, FL 33715 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition CLARK, PETER A Name: Name: 2950 PINELLAS BAYWAY SOUTH Address: Address: City-St-Zip: TIERRA VERDE, FL 33715 City-St-Zip: Title: TD () Delete Title: TD (X) Change () Addition ALBER, EDWIN Name: STEVE, STANLEY Name: Address: 1416 40TH AVENUE N.E. Address: 2202 WESTSHORE BLVD. City-St-Zip: ST. PETERSBURG, FL 33703 City-St-Zip: TAMPA, FL 33607 Title: () Delete Title: () Change () Addition WEINER, LAWRENCE Name: Name: 1825 BRIGHTWATERS BLVD. N.E. Address: Address: City-St-Zip: ST. PETERSBURG, FL 33704 City-St-Zip: Title: VCD () Delete Title: () Change () Addition Name: FLYNN, MIKE Name: 5206 INTERBAY BLVD. Address: Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition STANLEY, STEVE DOUG, WILLIAMSON Name: Name: 2202 WESTSHORE BLVD. 9075 SEMINOLE BLVD. Address: Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip: SEMINOLE, FL 33772 Title: () Delete Title: () Change () Addition MCCREARY, STEVE Name: Name: Address: P.O. BOX 18012 Address: TAMPA, FL 33679 City-St-Zip: 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: PETER A CLARK PD 04/14/2008