## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000000637

Entity Name: TAMPA BAYWATCH, INC.

**FILED** Mar 23, 2009 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

**OFFICERS AND DIRECTORS:** 

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:

Date

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition () Delete CLARK, PETER A Name: Name:

2950 PINELLAS BAYWAY SOUTH Address: Address: City-St-Zip: TIERRA VERDE, FL 33715 City-St-Zip:

Title: () Delete Title: () Change () Addition

STEVE, STANLEY Name: Name: Address: 2202 WESTSHORE BLVD. Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip:

Title: () Delete Title: () Change () Addition

WEINER, LAWRENCE Name: Name: Address: 1825 BRIGHTWATERS BLVD. N.E. Address: City-St-Zip: ST. PETERSBURG, FL 33704 City-St-Zip:

Title: VCD ( ) Delete Title: SD (X) Change ( ) Addition

Name: FLYNN, MIKE Name: WILLIAMSON, DOUG 5206 INTERBAY BLVD. 9075 SEMINOLE BLVD Address: Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: SEMINOLE, FL 33772

Title: () Delete Title: (X) Change ( ) Addition

DOUG, WILLIAMSON MCCREARY, STEVE Name: Name: 9075 SEMINOLE BLVD. P.O. BOX 18012 Address: Address: City-St-Zip: SEMINOLE, FL 33772 City-St-Zip: TAMPA, FL 33679

Title: () Delete Title: (X) Change ( ) Addition

MCCREARY, STEVE RAND, HONEY DR Name: Name: Address: P.O. BOX 18012 Address: 286 CRYSTAL GROVE BLVD

TAMPA, FL 33679 LUTZ, FL 33548 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 03/23/2009