

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N93000001428

FILED
Mar 31, 2009
Secretary of State

Entity Name: SEAHAWKS OF TAMPA BAY, INC.

Current Principal Place of Business:

COLEMAN JR. HIGH SCHOOL
4201 W ESTRELLA
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

COLEMAN JR. HIGH SCHOOL
P.O. BOX 13284
TAMPA, FL 336813284

New Mailing Address:

FEI Number: 59-3208265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HOLLAND, BRUCE
114 S. LINCOLN
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: BRUCE HOLLAND

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOLLAND, BRUCE
Address: 114 S. LINCOLN
City-St-Zip: TAMPA, FL 33609

Title: D () Delete
Name: BROWN, JULIET E
Address: 3325 S. MANHATTAN AVE.
City-St-Zip: TAMPA, FL 33629

Title: S () Delete
Name: MCGLONE, TENNA
Address: 4302 W JETTON
City-St-Zip: TAMPA, FL 33629

Title: FC () Delete
Name: PINNION, ROBERT
Address: 4502 VASCONIA
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: HOLLAND, SCARLETT
Address: 114 S LINCOLN
City-St-Zip: TAMPA, FL 33609

Title: D (X) Delete
Name: MCGLONE, JAMES
Address: 4302 W JETTON
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: REGISTER, GRACE L
Address: 4012 W. WISCONSIN AVE.
City-St-Zip: TAMPA, FL 33616

Title: D (X) Change () Addition
Name: MCGLONE, TENNA
Address: 4302 W JETTON
City-St-Zip: TAMPA, FL 33629

Title: FC (X) Change () Addition
Name: ROSE, CHRIS
Address: 4101 W. SAN JUAN
City-St-Zip: TAMPA, FL 33629

Title: S (X) Change () Addition
Name: RODRIGUEZ, CRISTINA
Address: 3816 W. SAN MIGUEL ST.
City-St-Zip: TAMPA, FL 33609

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: TENNA MCGLONE

D

03/31/2009

Electronic Signature of Signing Officer or Director

Date