2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001935

FILED Feb 11, 2009 Secretary of State

Entity Name: TAMPA BAY PARTNERSHIP FOR REGIONAL ECONOMIC DEVELOPMENT, INC.

Current Principal Place of Business: New Principal Place of Business:

4300 CYPRESS ST STE 250

TAMPA, FL 33607 US

Current Mailing Address: New Mailing Address:

TAMPA, FL 33607 US TAMPA, FL 33607 US

FEI Number: 59-3248071 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROGEL, STUART L 4300 W CYPRESS ST STE 250 TAMPA, FL 33607 US

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:

itle: PD () Delete Title: () Change () Addition

 Name:
 ROGEL, STUART L
 Name:
 Address:
 Address:
 4300 W CYPRESS ST STE 250
 Address:
 City-St-Zip:
 TAMPA, FL 33607
 City-St-Zip:

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

Name: GENSHAFT, JUDY Name: MCRAW, ROY

Address: 4300 W CYPRESS STREET, SUITE 250 Address: 4300 W CYPRESS STREET, SUITE 250

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607

Title: CD () Delete Title: CD (X) Change () Addition Name: MCCRAW, ROY Name: MASON, STEVE

Address: 4300 W CYPRESS STREET, STE 250 Address: 4300 W CYPRESS STREET, STE 250

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607

Title: VD () Delete Title: VD (X) Change () Addition Name: MASON, STEVE Name: LYASH, JEFF

Address: 4300 W. CYPRESS ST, SUITE 250 Address: 4300 W. CYPRESS ST, SUITE 250

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607

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

Name: LYASH, JEFF Name: SASSO, GARY

Address: 4300 W CYPRESS ST STE 250 Address: 4300 W CYPRESS ST STE 250

City-St-Zip: TAMPA, FL 33607 City-St-Zip: TAMPA, FL 33607

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: STUART L. ROGEL CEO 02/11/2009