

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001253

FILED
Feb 07, 2009
Secretary of State

Entity Name: TAMPA BAY PARROT HEADS IN PARADISE CLUB, INC.

Current Principal Place of Business:

922 LYNDHURST ST.
DUNEDIN, FL 34698 US

New Principal Place of Business:

1716 HITCHING POST LANE
DUNEDIN, FL 34698 US

Current Mailing Address:

P. O. BOX 41343
ST PETERSBURG, FL 33743 US

New Mailing Address:

FEI Number: 59-3299911 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANKENSHIP, SUSAN K
922 LYNDHURST ST
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

GILBERT, CHRISTI M
521 PINELLAS BAYWAY SOUTH
#406
TIERRA VERDE, FL 33715 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: CHRISTI M. GILBERT

02/07/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/C () Delete
Name: BLANKENSHIP, SUSAN K
Address: 922 LYNDHURST ST.
City-St-Zip: DUNEDIN, FL 34698

Title: V/FM () Delete
Name: STORY, STEVE
Address: 10220 VALLE DR
City-St-Zip: TAMPA, FL 33612

Title: T/P () Delete
Name: BARILE, DIANE
Address: 9301 RIVER COVE DR
City-St-Zip: TAMPA, FL 33569

Title: S/Y () Delete
Name: MOYERS, SUSAN
Address: 1605 SEND WAY
City-St-Zip: LUTZ, FL 33549

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/C (X) Change () Addition
Name: CREWS, BRYAN
Address: 1716 HITCHING POST LANE
City-St-Zip: DUNEDIN, FL 34698

Title: V/FM (X) Change () Addition
Name: BLISS, BOB
Address: 12356 FOXMOOR PEAK DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Title: T/P (X) Change () Addition
Name: GILBERT, CHRISTI
Address: 521 PINELLAS BAYWAY SOUTH #406
City-St-Zip: TIERRA VERDE, FL 33715

Title: S/Y (X) Change () Addition
Name: OLSEN, MIKE
Address: 16109 DARNELL ROAD
City-St-Zip: LUTZ, FL 33549

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: CHRISTI M. GILBERT

T/P

02/07/2009

Electronic Signature of Signing Officer or Director

Date