2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004046

Entity Name: PINELLAS SAC ASSOCIATION, INC.

FILED Apr 30, 2009 Secretary of State

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

9255 2ND ST N 11791 111TH TERR N

ST PETERSBURG, FL 33702 US US SEMINOLE, FL 33778

Current Mailing Address: New Mailing Address:

PO BOX 2532 9255 2ND ST N

ST PETERSBURG, FL 33702 US LARGO, FL 33779 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

ROWLEY, VICTOR 9255 2ND ST N

ST PETERSBURG, FL 33702 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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

(X) Change () Addition

() Delete ROWLEY, VIC ROWLEY, VIC Name: Name: Address: 9255 SECOND ST. N. Address: 9255 SECOND ST. N.

City-St-Zip: ST. PETERSBURG, FL 33702 City-St-Zip: ST. PETERSBURG, FL 33702 US

(X) Change () Addition Title: () Delete Title: MCCORMICK, THERESA Name: Name: MCCORMICK, THERESA Address: 5194 HUNTINGTON CIR NE Address: 5194 HUNTINGTON CIR NE City-St-Zip: SAINT PETERSBURG, FL 33703 City-St-Zip: SAINT PETERSBURG, FL 33703 US

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

HODGES, PAUL S Name: HODGES, PAUL S Name: 4556 GREAT LAKES DR S Address: 2189 LOGAN ST Address: City-St-Zip: CLEARWATER, FL 33765 City-St-Zip: CLEARWATER, FL 33762 US

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

Name: Name: WESTERMEYER, DAVID Address: Address: 11791 111TH TERR N City-St-Zip: City-St-Zip: SEMINOLE, FL 33778 US

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: PAUL S HODGES **TREA** 04/30/2009