

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000003404

FILED
Jan 22, 2009
Secretary of State

Entity Name: THE TAMPA DIETETIC ASSOCIATION, INC.

Current Principal Place of Business:

2780 E FOWLER AVE
#149
TAMPA, FL 33612 US

New Principal Place of Business:

Current Mailing Address:

2780 E FOWLER AVE
#149
TAMPA, FL 33612 US

New Mailing Address:

FEI Number: 59-2230690 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEITH, MARY A
2106 EAST ANNIE ST
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

STAPELL, CHRISTINE
1839 B BUFORD COURT
TALLAHASSEE, FL 32308 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: CHRISTINE STAPELL

01/22/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PIEGSLEY, MICHELLE
Address: 3216 STEVENSON ST
City-St-Zip: PLANT CITY, FL 33566

Title: T () Delete
Name: KEITH, MARY
Address: 2106 S ANNIE ST
City-St-Zip: TAMPA, FL 33612

Title: CS () Delete
Name: KARDELLA, KRISTIE
Address: 6638 MARINA PT VILLAGE CT 104
City-St-Zip: TAMPA, FL 336356

Title: RS () Delete
Name: HYLER, NICOLE
Address: 609 W RIVER DR
City-St-Zip: TAMPA, FL 33617

Title: VP () Delete
Name: PUGLSEY, MICHELLE
Address: 3216 STEVENSON ST
City-St-Zip: PLANT CITY, FL 33566

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS (X) Change () Addition
Name: CARTER, LESLIE
Address: 608 ARBOR LAKE LANE
City-St-Zip: TAMPA, FL 33602

Title: MRS (X) Change () Addition
Name: PUGSLEY, MICHELLE D
Address: 3216 STEVENSON STREET
City-St-Zip: PLANT CITY, FL 33566

Title: MS (X) Change () Addition
Name: KORDELLA, KRISTIE
Address: 6638 MARINA PT VILLAGE CT #104
City-St-Zip: TAMPA, FL 33635

Title: MRS (X) Change () Addition
Name: MILLER, NICOLE
Address: 609 W. RIVER DRIVE
City-St-Zip: TAMPA, FL 33617

Title: MS (X) Change () Addition
Name: MAY, KIM
Address: 4202 E. FOWLER AVENUE
City-St-Zip: TAMPA, FL 33620

Title: MS () Change (X) Addition
Name: MASSIE, KIMBERLY
Address: 1408 SHELL FLOWER DRIVE
City-St-Zip: BRANDON, FL 33511

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: MICHELLE D. PUGSLEY

MRS

01/22/2009

Electronic Signature of Signing Officer or Director

Date