2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005156

FILED Mar 01, 2009 Secretary of State

Entity Name: CROATIA CLUB OF TAMPA BAY, INC.

Current	rincipal Place	e of Business:	New Principal Place	ot Business:	
	TH STREET N ATER, FL 337	64			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX CLEARW	.5536 ATER, FL 337	758			
FEI Numbei	r: 59-3432831	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
1564 OAK CLEARW	NN, BRUCE G (ADIA LANE ATER, FL 337	764 US	e purpose of changing its registere	d office or registered agent, or both,	
	te of Florida.		parpood or origing no regioner	a cinice of registered agent, or bean,	
SIGNATU					
	Electro	nic Signature of Registered A	gent	Date	
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	SIMUNOVIC, Y 4116 HONOLU	JLU DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPD (CORDAS, FRA 10298 MONAR LARGO, FL 3:	RCH DR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SD (SKRIPNIK, MII 2837 ORHARE	DR.	Title: Name: Address:	() Change () Addition	
Address: City-St-Zip:	PALM HARBO	R, FL 34684	City-St-Zip:		
Address:	PALM HARBO TD (BASIC, MARA 966 BAY ESPA) Delete	City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition	
Address: City-St-Zip: Title: Name: Address:	PALM HARBO TD (BASIC, MARA 966 BAY ESP/ CLEARWATER) Delete ANDADE R BEACH, FL 33767) Delete CO D	Title: Name: Address:	() Change () Addition () Change () Addition	

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: LOVRO VRBOS D 03/01/2009