

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005824

FILED
Jan 07, 2008
Secretary of State

Entity Name: TAMPA BAY SEMINOLE CLUB, INC.

Current Principal Place of Business:

418 GOLDEN ELM DRIVE
SEFFNER, FL 33584

New Principal Place of Business:

1545 W RIVER LN
TAMPA, FL 33603

Current Mailing Address:

P O BOX 21185
TAMPA, FL 336221185 US

New Mailing Address:

FEI Number: 59-3447310 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZOODSMA, KENNY
418 GOLDEN ELM DRIVE
SEFFNER, FL 33622 US

Name and Address of New Registered Agent:

PALIOS, MICHAEL
1545 W RIVER LN
TAMPA, FL 33603 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: MICHAEL PALIOS

01/07/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ZOODSMA, KENNY
Address: 418 GOLDEN ELM DRIVE
City-St-Zip: SEFFNER, FL 33584

Title: VP () Delete
Name: MYERS, STEPHEN J
Address: 9913 HARTWELL BRIDGE CIR.
City-St-Zip: TAMPA, FL 33626

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PALIOS, MICHAEL
Address: 1545 W RIVER LN
City-St-Zip: TAMPA, FL 33603

Title: VP (X) Change () Addition
Name: WHELIHAN, JENNIFER
Address: 9913 HARTWELL BRIDGE CIR.
City-St-Zip: TAMPA, FL 33626

Title: BM () Change (X) Addition
Name: ZOODSMA, KENNY
Address: 418 GOLDEN ELM DR
City-St-Zip: SEFFNER, FL 33584

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: MICHAEL PALIOS

PD

01/07/2008

Electronic Signature of Signing Officer or Director

Date