

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000222

FILED
Apr 04, 2009
Secretary of State

Entity Name: THE PROGRESS VILLAGE PANTHERS, INC.

Current Principal Place of Business:

8317 ENDIVE AVE
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

8317 ENDIVE AVE
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-3435471

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KEY, JEFFERY O
8317 ENDIVE AVE
TAMPA, FL 33619 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: SANDERS, LARRY W
Address: 5806 82ND STREET SOUTH
City-St-Zip: TAMPA, FL 33619

Title: T () Delete
Name: DOBY, DARALYN
Address: 4901 82N ST
City-St-Zip: TAMPA, FL 33619

Title: VP () Delete
Name: KEY, JEFF
Address: 8317 ENDIVE AVE
City-St-Zip: TAMPA, FL 33619

Title: T () Delete
Name: TIMMONS, TYRONE
Address: 1420 NOHRLAKE DR
City-St-Zip: BRANDON, FL 33571

Title: AD () Delete
Name: SANDERS, DWAYNE E SR
Address: 5806 82ND ST S
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LARRY W. SANDERS SR

TRU

04/04/2009

Electronic Signature of Signing Officer or Director

Date