

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002742

FILED
Mar 05, 2008
Secretary of State

Entity Name: TAMPA KNIGHTS FUTBOL CLUB, INC.

Current Principal Place of Business:

4716 W MONTGOMERY AVE.
TAMPA, FL 33616 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 18736
TAMPA, FL 33679 US

New Mailing Address:

FEI Number: 59-3468964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OBECK, ERIC S
2909 BAYSHORE CT
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

CALHOUN, MARY O
1410 DESOTO AVE
TAMPA, FL 33606 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: MARY O CALHOUN

03/05/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OSBORN, NIGEL
Address: LONGFELLOW
City-St-Zip: TAMPA, FL 33629 US

Title: T () Delete
Name: OBECK, ERIC
Address: 2909 BAYSHORE CT
City-St-Zip: TAMPA, FL 33611 US

Title: D () Delete
Name: HOLLAR, SIMONE
Address: 3212 W. CHAPIN AVE.
City-St-Zip: TAMPA, FL 33611 US

Title: D () Delete
Name: HATTON, PAIGE
Address: 3217 CHAPIN AVE.
City-St-Zip: TAMPA, FL 33611 US

Title: D () Delete
Name: HATTON, DONNA
Address: 3217 CHAPIN AVE.
City-St-Zip: TAMPA, FL 33611 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: EVANGELISTA, REBECCA
Address: 4716 W MONTGOMERY AVE.
City-St-Zip: TAMPA, FL 33616

Title: T (X) Change () Addition
Name: CALHOUN, MARY O
Address: 1410 DESOTO AVE
City-St-Zip: TAMPA, FL 33606 US

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: MARY O CALHOUN

T

03/05/2008

Electronic Signature of Signing Officer or Director

Date