2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004608

FILED Feb 13, 2009 Secretary of State

Entity Name: THE CARIBBEAN AMERICAN CLUB, INC.

Current Principal Place of Business: New Principal Place of Business: 6211 S MARTINDALE AVEUE TAMPA, FL 33611 **Current Mailing Address: New Mailing Address:** PO BOX 320032 P.O. BOX 320032 TAMPA, FL 33679 TAMPA, FL 33679 FEI Number: 59-3466877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TAYLOR, MARY L PREVATT ENGLAND & TAYLOR 201 N FRANKLIN SUITE 2505 TAMPA, FL 33602 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition MILLER, JOSEPH R MILLER, JOSEPH R Name: Name: POB 191506 Address: PO BOX 191506 Address: City-St-Zip: MIAMI BEACH, FL 33119 City-St-Zip: MIAMI BEACH, FL 33119 Title: Title: () Delete () Change () Addition Name: TATUM, JUNE Name: Address: 3116 PRICE AVE Address: City-St-Zip: TAMPA, FL 33611 City-St-Zip: Title: () Delete Title: () Change () Addition GRIFFITH, SADIE Name: Name: 3211 SAN JUAN ST Address: Address: City-St-Zip: TAMPA, FL 33629 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: BROWN, MARLENE Name: BROWN, MARLENE 3909 TREASURE CIRCLE 3909 TREASURE CIR Address: Address: City-St-Zip: TAMPA, FL 33616 City-St-Zip: TAMPA, FL 33616 Title: () Delete Title: () Change () Addition MOORE, TAMMY Name: Name: 3908 N RIDGE AVE Address: Address: City-St-Zip: TAMPA, FL 33603 City-St-Zip: Title: () Delete Title: () Change () Addition CAWLEY, JACQUELINE Name: Name: Address: 2815 MARLIN AVE Address: TAMPA, FL 33611 City-St-Zip: 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: JACQUELINE CAWLEY D 02/13/2009