

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000216

FILED
Apr 01, 2009
Secretary of State

Entity Name: TAMPA BAY HOSPITALITY ALLIANCE, INC.

Current Principal Place of Business:

109 N. BRUSH ST.
SUITE 400
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 3298
TAMPA, FL 33602

New Mailing Address:

FEI Number: 59-3517705

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOYER, KIM
25824 BLOOMSBURY CT
LAND O LAKES, FL 34639 US

Name and Address of New Registered Agent:

WARREN, STASSA E
2412 GROVEWAY DRIVE
VALRICO, FL 33596 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: STASSA E. WARREN

04/01/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RUTLEDGE, CHERI
Address: TAMPA MARRIOTT AIRPORT
City-St-Zip: TAMPA, FL 33607

Title: ST () Delete
Name: GRABER, TERRY
Address: 17120 GULF BLVD
City-St-Zip: N. REDDINGTON BCH, FL 33708

Title: D () Delete
Name: LYNCH, DANNETTE
Address: 2741 FORREST PARKWAY
City-St-Zip: LARGO, FL 33771

Title: D () Delete
Name: HOCH, GEORGE
Address: 12000 G BOULEVARD
City-St-Zip: TREASURE ISLAND, FL 33706

Title: D () Delete
Name: BARTHOLOMAY, JIM
Address: 4200 JIM WALTON BLVD.
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: KEITH, OVERTON
Address: TRADEWINDS ISLAND GRAND 5500 GULF BLVD
City-St-Zip: SAINT PETERSBURG, FL 33706

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
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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: JIM BARTHOLOMAY

D

04/01/2009

Electronic Signature of Signing Officer or Director

Date