2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2008
Secretary of State

DOCUMENT# N98000001043

Entity Name: THE TIGER TOWN PIG FESTIVAL, INC.

Current Principal Place of Business:

90 LAKE MORTON DR
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

PO BOX 8797
LAKELAND, FL 33806

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STUART, JAN
1 LAKE MORTON
LAKELAND, FL 33801 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:	D	( ) Delete
Name:	BUZZANCA, FRANK	
Address:	4302 FOREST HILLS DRIVE	
City-St-Zip:	LAKELAND, FL 33811	
Title:	SD	( ) Delete
Name:	OLINGER, TERESA	
Address:	4511 CINDY ROAD	
City-St-Zip:	LAKELAND, FL 33809	
Title:	V	( ) Delete
Name:	BROOMFIELD, DARA	
Address:	2717 COVENTRY AVE.	
City-St-Zip:	LAKELAND, FL 33803	
Title:	V	( ) Delete
Name:	PHILLIPS, KRISTIN	
Address:	1100 OAKBRIDGE PKWY., 138	
City-St-Zip:	LAKELAND, FL 33803	
Title:	T/D	( ) Delete
Name:	MASON, LINDA	
Address:	4932 IRONWOOD TRAIL	
City-St-Zip:	BARTOW, FL 33830	
Title:	P	( ) Delete
Name:	CHRISTIAN, CECELIA	
Address:	3015 BUCKINGHAM DR	
City-St-Zip:	LAKELAND, FL 33803	

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:	T/D	(X) Change ( ) Addition
Name:	MASON, LINDA	
Address:	1383 CRESCENT WOODS LOOP	
City-St-Zip:	LAKELAND, FL 33813	
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: LINDA SUE MASON T/D 02/05/2008
Electronic Signature of Signing Officer or Director — Date