2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# N98000005075

Entity Name: CLUB SOCIAL ECUATORIANO DE TAMPA, INC.

Current Principal Place of Business:

8104 N HALE AVE
TAMPA, FL 33614

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 151452
TAMPA, FL 33684

New Mailing Address:

8104 N HALE AVE
TAMPA, FL 33614

FEI Number: 59-3531690 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VERA, GRETTA
8104 N HALE AVE
TAMPA, FL 33614 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: DP ( ) Delete
Name: VERA, GRETTA
Address: 8104 N HALE AVE
City-St-Zip: TAMPA, FL 33614

Title: DS ( ) Delete
Name: GUEVARA, BLANCA
Address: 6902 N HUBERT AVE
City-St-Zip: TAMPA, FL 33614

Title: VD ( ) Delete
Name: MORALES, MERCEDES
Address: 2111 W. COMANCHE AVE.
City-St-Zip: TAMPA, FL 33603

Title: DT ( ) Delete
Name: VERA, AGUSTIN F
Address: 8104 N. HALE AVE
City-St-Zip: TAMPA, FL 33614

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:

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: GRETTA VERA DP 04/07/2009

Electronic Signature of Signing Officer or Director — Date