

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002711

FILED
Jan 21, 2009
Secretary of State

Entity Name: THE KREWE OF ST. FLORIAN, INC.

Current Principal Place of Business:

3837 NORTHDAL BLVD.
#288
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

3837 NORTHDAL BLVD.
#288
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-3565639

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOHAN, JACE
3837 NORTHDAL BLVD.
#288
TAMPA, FL 33624 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: VP () Delete
Name: ALLEN, GARY
Address: 1208 BRANDON LAKES CT.
City-St-Zip: UALRICO, FL 33594

Title: T () Delete
Name: KOHAN, JACE
Address: 16604 EAST COURSE DR.
City-St-Zip: TAMPA, FL 33624

Title: P () Delete
Name: WOODS, DOUG
Address: 23916 FOREST VIEW DR
City-St-Zip: LAND O LAKES, FL 34639

Title: S () Delete
Name: OGLESBY, WILLIAM
Address: 213 ROSIER RD
City-St-Zip: BRANDON, FL 33510

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SPICOLA, RUSSELL
Address: 4801 N. SHIRLEY DR.
City-St-Zip: TAMPA, FL 33603

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: BIBILONI, ANTHONY
Address: 4508 N. LINCOLN
City-St-Zip: TAMPA, FL 33614

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: JACE KOHAN

VP

01/21/2009

Electronic Signature of Signing Officer or Director

Date