2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 21, 2008
Secretary of State

DOCUMENT# N99000005363

Entity Name: TAMPA BAY ASSOCIATION FOR WOMEN PSYCHOTHERAPISTS, INC.

Current Principal Place of Business:

P. O. BOX 273712
TAMPA, FL 33688 US

New Principal Place of Business:

425 S. ORLEANS AVE
TAMPA, FL 33606 US

Current Mailing Address:

TBAWP
P. O. BOX 273712
TAMPA, FL 33688 US

New Mailing Address:

FEI Number: 37-7463825 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WHITNEY, SUSAN B MS.
P. O. BOX 273712
TAMPA, FL 33688 US

Name and Address of New Registered Agent:

MAHANEY, ELIZABETH A MS.
425 S. ORLEANS AVE
TAMPA, FL 33606 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: ELIZABETH MAHANEY 09/21/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete
Name: SANTIAGO, LYNNE
Address: P.O. BOX 273712
City-St-Zip: TAMPA, FL 33688 US

Title: PAST ( ) Delete
Name: MULLOY, JEAN
Address: P.O. BOX 273712
City-St-Zip: TAMPA, FL 33688 US

Title: TRES ( ) Delete
Name: WHITNEY, SUSAN
Address: P.O. BOX 273712
City-St-Zip: TAMPA, FL 33688 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition
Name: SANTIAGO, LYNNE
Address: P.O. BOX 273712
City-St-Zip: TAMPA, FL 33688 US

Title: DIR (X) Change ( ) Addition
Name: MULLOY, JEAN
Address: P.O. BOX 273712
City-St-Zip: TAMPA, FL 33688 US

Title: DIR (X) Change ( ) Addition
Name: ZOHLER, ROENE
Address: P.O. BOX 273712
City-St-Zip: TAMPA, FL 33688 US

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: ELIZABETH MAHANEY MS. 09/21/2008
Electronic Signature of Signing Officer or Director Date