2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2009
Secretary of State

DOCUMENT# N99000005426

Entity Name: BAY BLIZZARD BALL, INC.

Current Principal Place of Business:

6408 CAUSEWAY BLVD
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

PO BOX 543
THONOTOSASSA, FL 33592

New Mailing Address:

FEI Number: 59-3695929 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PETERS, ALEXANDRA M
6408 CAUSEWAY BLVD
TAMPA, FL 33619 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: PDS ( ) Delete
Name: PETERS, ALEXANDRA
Address: PO BOX 893
City-St-Zip: RIVERVIEW, FL 33568

Title: VD ( ) Delete
Name: PETERS, ANDREW
Address: PO BOX 893
City-St-Zip: RIVERVIEW, FL 33568

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change ( ) Addition
Name: PETERS, ALEXANDRA
Address: PO BOX 543
City-St-Zip: THONOTOSASSA, FL 33592

Title: VD (X) Change ( ) Addition
Name: PETERS, ANDREW
Address: PO BOX 543
City-St-Zip: THONOTOSASSA, FL 33592

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: ALEXANDRA PETERS PD 01/13/2009

Electronic Signature of Signing Officer or Director — Date