

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005769

FILED
Feb 22, 2007
Secretary of State

Entity Name: ZEST CLUB OF TAMPA BAY, INC.

Current Principal Place of Business:

916 YORK DRIVE
BRANDON, FL 33510

New Principal Place of Business:

Current Mailing Address:

916 YORK DRIVE
BRANDON, FL 33510

New Mailing Address:

FEI Number: 59-3612117

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JUMAH, YAKEEN
916 YORK DRIVE
BRANDON, FL 33510 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: PD () Delete
Name: ALEGE, WOLE DR
Address: 910 BRIAR CLIFF DRIVE
City-St-Zip: VALRICO, FL 33594

Title: SD () Delete
Name: JUMAH, YAKEEN
Address: 916 YORK DRIVE
City-St-Zip: BRANDON, FL 33510

Title: TD () Delete
Name: OYEBAMUI, RAZAK
Address: 2920 ANGELA CT
City-St-Zip: TAMPA, FL 33610

Title: DV () Delete
Name: ADEKEMI, MATHEWS
Address: 4805 ROCK FISH COURT
City-St-Zip: TAMPA, FL 33617

Title: PD () Delete
Name: FADEYI, TUNDE
Address: 11362 BROOKGREEN DR
City-St-Zip: TAMPA, FL 33624

Title: ASA () Delete
Name: OWOJORI, BISI
Address: 7309 ENSENADA CT #118
City-St-Zip: TAMPA, FL 33634

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

Title: ASA (X) Change () Addition
Name: OWOJORI, BISI
Address: 10524 OPUS DRIVE
City-St-Zip: RIVERVIEW, FL 33569

I hereby certify that the information supplied with this filing does not qualify for the 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: YAKEEN JUMAH

SD

02/22/2007

Electronic Signature of Signing Officer or Director

Date