

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006616

FILED
Mar 25, 2009
Secretary of State

Entity Name: TAMPA BAY TANGO, INC.

Current Principal Place of Business:

10310 ROSEMOUNT DR
TAMPA, FL 33624

New Principal Place of Business:

Current Mailing Address:

10310 ROSEMOUNT DR
TAMPA, FL 33624

New Mailing Address:

FEI Number: 59-3609895

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOBLE, JANA
10310 ROSEMOUNT DRIVE
TAMPA, FL 336245122 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: GOBLE, JANA
Address: 10310 ROSEMOUNT DRIVE
City-St-Zip: TAMPA, FL 33624

Title: DV () Delete
Name: KOZLOV, NICK
Address: 222 BRIGHT WATERS
City-St-Zip: SAINT PETERSBURG, FL 33704

Title: SD () Delete
Name: FORESTIER, IAN
Address: 2517 19TH STREET NORTH
City-St-Zip: SAINT PETERSBURG, FL 33713

Title: TD () Delete
Name: FRINGS, GARY
Address: 6817 WAGON WHEEL CIRCLE
City-St-Zip: SARASOTA, FL 34243

Title: D () Delete
Name: LICHTSTEIN, LEN
Address: 1655 S. HIGHLAND AVENUE, #J-188
City-St-Zip: CLEARWATER, FL 33756

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:

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: JANA C. GOBLE

PRES

03/25/2009

Electronic Signature of Signing Officer or Director

Date