


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

4/21

**FILED**  
**May 22, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90088 019 \*\*\*150.00

DOCUMENT # P00000117326  
 1. Entity Name  
 TAMPA ACQUISITIONS, INC.



Principal Place of Business 1201 OAKFIELD DRIVE SUITE 109 BRANDON, FL 33510	Mailing Address PO BOX 1110 BRANDON, FL 33509
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**DO NOT WRITE IN THIS SPACE**



04112008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3687467	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  
 MCKNIGHT, WILLIAM  
 1201 OAKFIELD DRIVE  
 SUITE 109  
 BRANDON, FL 33510

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *William McKnight* DATE: 4/18/08

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

**FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKNIGHT, WILLIAM 805 ARROWHEAD LANE BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKNIGHT, KATHRYN 805 ARROWHEAD LANE BRANDON, FL 33511
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William McKnight* DATE: 5/19/08 (SB) 681-4279

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR