

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000031991

Entity Name: B.F.T. OF TAMPA BAY, INC.

FILED  
Apr 22, 2009  
Secretary of State

## Current Principal Place of Business:

2130 ASHLEY OAKS CIRCLE  
SUITE 102  
WESLEY CHAPEL, FL 33544

## New Principal Place of Business:

## Current Mailing Address:

2130 ASHLEY OAKS CIRCLE  
SUITE 102  
WESLEY CHAPEL, FL 33544

## New Mailing Address:

FEI Number: 59-3715636

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAUNDERS, NICOLE B  
2130 ASHLEY OAKS CIRCLE  
SUITE 102  
WESLEY CHAPEL, FL 33543 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BUCK, DONALD A JR  
Address: 293 TALL OAK TRAIL  
City-St-Zip: TARPON SPRINGS, FL 34688

Title: VD ( ) Delete  
Name: SAUNDERS, NICOLE  
Address: 9933 MILANO DR.  
City-St-Zip: TRINITY, FL 34655

Title: VPD ( ) Delete  
Name: GAMM, STEVEN E  
Address: 1911 FLORESTA VIEW DRIVE  
City-St-Zip: TAMPA, FL 33618

## 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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN E. GAMM

VPD

04/22/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date