

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000005790

FILED
Feb 19, 2007
Secretary of State

Entity Name: SOUTH TAMPA ATHLETIC RECREATIONAL SPORTS, INC.

Current Principal Place of Business:

4921 S LOIS AVE
#A
TAMPA, FL 33611

New Principal Place of Business:

Current Mailing Address:

4921 S LOIS AVE
#A
TAMPA, FL 33611

New Mailing Address:

PO BOX 10563
TAMPA, FL 33679 05

FEI Number: 01-0596394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULZ, KATHY
4921 S. LOIS AVE
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

SCHULZ, KATHY
3801 S WESTSHORE BLVD
TAMPA, FL 33611 US

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:

02/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SCHULZ, RICHARD
Address: 3615 BELCHER DR.
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: CANCINO, RHONDA
Address: 1533 AUBURN OAKS DRIVE
City-St-Zip: AUBURNDALE, FL 33823

Title: D () Delete
Name: SCHULZ, KATHY
Address: 3801 S. WESTSHORE BLVD
City-St-Zip: TAMPA, FL 33611

Title: D () Delete
Name: PIETRO, JOE
Address: 5720 1ST ST.
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: FERNANDEZ, KRISTOPHER E
Address: 3922 W. TACON ST.
City-St-Zip: TAMPA, FL 33629

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: D (X) Change () Addition
Name: PIETRO, JOE
Address: 3813 WEST BAY AVE.
City-St-Zip: TAMPA, FL 33611

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

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

SIGNATURE: KATHY SCHULZ

D

02/19/2007

Electronic Signature of Signing Officer or Director

Date