

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000038344

Entity Name: TAMPA BAY SURFACES, INC.

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

501 SOUTH FALKENBURG ROAD
#D13
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

16143 HARBAR OAKS DRIVE
MONTVERDE, FL 34756

New Mailing Address:

FEI Number: 26-0110052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, TALMON E
16143 HARBAR OAKS DRIVE
MONTVERDE, FL 34756 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: P () Delete
Name: PLUNK, CHARLIE
Address: 805 AVENUE H, SUITE 508
City-St-Zip: ARLINGTON, TX 76011

Title: VP () Delete
Name: STAMBAUGH, MARK
Address: 805 AVENUE H, SUITE 508
City-St-Zip: ARLINGTON, TX 76011

Title: S,T () Delete
Name: DAVIS, TALMON E
Address: 16143 HARBAR OAKS DRIVE
City-St-Zip: MONTVERDE, FL 34756

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: PLUNK, CHARLIE
Address: 805 AVENUE H, SUITE 508
City-St-Zip: ARLINGTON, TX 76011

Title: VP/D (X) Change () Addition
Name: STAMBAUGH, MARK
Address: 805 AVENUE H, SUITE 508
City-St-Zip: ARLINGTON, TX 76011

Title: S/D (X) Change () Addition
Name: DAVIS, TALMON E
Address: 16143 HARBAR OAKS DRIVE
City-St-Zip: MONTVERDE, FL 34756

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: TALMON E.DAVIS

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04/28/2008

Electronic Signature of Signing Officer or Director

Date