

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000049345

FILED
May 07, 2009
Secretary of State

Entity Name: TAMPA BAY COMMUNICATIONS SUPPLY, INC.

Current Principal Place of Business:

5408-B NORTH 59TH STREET
TAMPA, FL 33610

New Principal Place of Business:

5474 WILLIAMS ROAD
SUITE 2A
TAMPA, FL 33610

Current Mailing Address:

5408-B NORTH 59TH STREET
TAMPA, FL 33610

New Mailing Address:

5474 WILLIAMS ROAD
SUITE 2A
TAMPA, FL 33610

FEI Number: 59-3253421

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDERMOTT, MICHAEL P.A.
791 W LUMSDEN AVE
BRANDON, FL 33511 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LAMBERT III, WILLIAM M PRES
Address: 2540 LAURELWOOD LANE
City-St-Zip: VALRICO, FL 33596 US

Title: O () Delete
Name: SMITH, JULIE R VP
Address: 12712 BALM RIVER ROAD
City-St-Zip: RIVERVIEW, FL 33569 US

Title: O () Delete
Name: HEIDTMAN, SANDRA L SEC
Address: 5604 WILLIAM GRANT WAY APT. 102
City-St-Zip: TAMPA, FL 33610 US

Title: O () Delete
Name: HICKS, CHRISTY M TREAS
Address: 6209 KITERIDGE DRIVE
City-St-Zip: LITHIA, FL 33547 US

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:

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: CHRISTY HICKS

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05/07/2009

Electronic Signature of Signing Officer or Director

Date