

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000033670

FILED  
Jan 11, 2010  
Secretary of State

Entity Name: BUSCH BLVD. LAND CORP.

## Current Principal Place of Business:

9000 NORTH 18TH STREET  
TAMPA, FL 33604

## New Principal Place of Business:

9000 NORTH 18TH STREET  
SUITE A  
TAMPA, FL 33604

## Current Mailing Address:

9000 N. 18TH ST.  
SUITE A  
TAMPA, FL 33604

## New Mailing Address:

9000 NORTH 18TH STREET  
SUITE A  
TAMPA, FL 33604

FEI Number: 59-3315685

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

AZZARELLI, THOMAS J  
9000 N. 18TH ST.  
STE A  
TAMPA, FL 33604 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: D  
Name: AZZARELLI, MICHAEL A  
Address: 9000 NORTH 18TH STREET  
City-St-Zip: TAMPA, FL 33604

Title: D  
Name: AZZARELLI, THOMAS J  
Address: 9000 N. 18TH ST. A  
City-St-Zip: TAMPA, FL 33604

Title: D  
Name: AZZARELLI, STEPHEN P  
Address: 9000 NORTH 18TH ST  
City-St-Zip: TAMPA, FL 33604

Title: D  
Name: NAILS, JOAN M  
Address: 9000 N 18TH ST  
City-St-Zip: TAMPA, FL 33604

Title: D  
Name: KEESLER, JANET A  
Address: 9000 N 18TH ST  
City-St-Zip: TAMPA, FL 33604

I hereby 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 all other like empowered.

SIGNATURE: THOMAS J. AZZARELLI

D

01/11/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date