

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000105963

FILED  
Apr 17, 2009  
Secretary of State

Entity Name: TAMPA STADIUM SUITE, INC.

## Current Principal Place of Business:

611 WEST BAY STREET  
TAMPA, FL 33606

## New Principal Place of Business:

## Current Mailing Address:

611 WEST BAY STREET  
TAMPA, FL 33606

## New Mailing Address:

FEI Number: 59-3490446      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SHIMBERG, MANDELL  
611 WEST BAY STREET  
TAMPA, FL 33606      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: SHIMBERG, MANDELL  
Address: 611 WEST BAY STREET  
City-St-Zip: TAMPA, FL 33606

Title: D (X) Delete  
Name: SHIMBERG, JAMES H  
Address: 611 WEST BAY STREET  
City-St-Zip: TAMPA, FL 33606

Title: SD ( ) Delete  
Name: BUCKLEY, STEVE  
Address: 11540 HIGHWAY 92 EAST  
City-St-Zip: SEFFNER, FL 33584

Title: DV ( ) Delete  
Name: VALDEZ, MICHAEL  
Address: 3307 W SAN NICHOLAS ST  
City-St-Zip: TAMPA, FL 33629

Title: TD ( ) Delete  
Name: MELECH, PAUL J JR  
Address: 6419 MACLAURIN DR  
City-St-Zip: TAMPA, FL 33647

## 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:

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: MANDELL SHIMBERG

PD

04/17/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date