

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V55310

FILED  
Mar 05, 2008  
Secretary of State

Entity Name: TAMPA BAY SEWING CENTER, INC.

## Current Principal Place of Business:

12635 CITRUS PARK DR.  
TAMPA, FL 33625

## New Principal Place of Business:

## Current Mailing Address:

12635 CITRUS PARK DR.  
TAMPA, FL 33625

## New Mailing Address:

22809 SILLS LOOP  
LAND O'LAKES, FL 34639

FEI Number: 59-3135898

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GORNIK, WALTER P.  
22809 SILLS LOOP  
LAND O LAKES, FL 33613 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: GORNIK, WALTER P  
Address: 22809 SILLS LOOP  
City-St-Zip: LAND O' LAKES, FL

Title: ST ( ) Delete  
Name: GORNIK, JOVEITA  
Address: 22809 SILLS LOOP  
City-St-Zip: LAND O' LAKES, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: WALTER GORNIK

PRES

03/05/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date