

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
Mar 14, 2012  
Secretary of State

DOCUMENT# N04000002439

Entity Name: MISSION TAMPA, INC.

**Current Principal Place of Business:**

801 EAST HILLSBOROUGH AVENUE  
TAMPA, FL 33604

**New Principal Place of Business:**

**Current Mailing Address:**

801 EAST HILLSBOROUGH AVENUE  
TAMPA, FL 33604

**New Mailing Address:**

FEI Number: 20-0836960

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WOOLDRIDGE, GARY B  
801 EAST HILLSBOROUGH AVENUE  
TAMPA, FL 33604 US

**Name and Address of New Registered Agent:**

FLOYD, GREG REV.  
801 E. HILLSBOROUGH AVE.  
TAMPA, FL 33604 US

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: GREG FLOYD

03/14/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: COPPLE, MIKE  
Address: 8010 N. 12TH ST  
City-St-Zip: TAMPA, FL 33604

Title: DVP  
Name: MCGEE, MARK  
Address: P.O. BOX 360383  
City-St-Zip: TAMPA, FL 33673

Title: DT  
Name: ATCHISON, TOM  
Address: 1611 E. BOUGAINVILLEA AVE.  
City-St-Zip: TAMPA, FL 33612

Title: DS  
Name: COPPLE, JUDY A  
Address: 8010 N 12TH STREET  
City-St-Zip: TAMPA, FL 33604

Title: D  
Name: WILLIAMS, EDDY  
Address: 300 EAST SLIGH AVE.  
City-St-Zip: TAMPA, FL 336604

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GREG FLOYD

RA

03/14/2012

Electronic Signature of Signing Officer or Director

Date