

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL
REPORT**

DOCUMENT# 701093

Entity Name: YE MYSTIC KREWE OF GASPARILLA

Current Principal Place of Business:

1114 W CASS ST
TAMPA, FL 33606

Current Mailing Address:

P.O. BOX 1514
TAMPA, FL 33601 US

FEI Number: 59-0552523

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARNES, DONALD J
1114W CASS ST
TAMPA, FL 33606 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PITTMAN, ANDREW V
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title VP
Name THOMAS, CLAY O
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title TREASURER
Name MACKIE, BENJAMIN D
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title SECRETARY
Name ABRUNZO, CHRISTOPHER T
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title DIRECTOR
Name ALFONSO, CARLOS J
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title DIRECTOR
Name GOUGH , ROBERT B III
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title DIRECTOR
Name GRAHAM, DREW A
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title DIRECTOR
Name STALLINGS, CHARLES NORMAN
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

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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: DONALD J BARNES

EXECUTIVE OFFICER

04/08/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DAVIS, CHARLES MARION III
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title DIRECTOR
Name CHILLURA, VINCENT M
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title EXECUTIVE OFFICER
Name BARNES, DONALD JAMES
Address P. O. BOX 1514
City-State-Zip: TAMPA FL 33601-1514

Title DIRECTOR
Name KETCHEY, CHRISTOPHER C
Address 1114 W CASS ST
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name LACKMAN, PETER W
Address 1114 W CASS ST
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name REYNOLDS, RYAN POE
Address P.O. BOX 1514
City-State-Zip: TAMPA FL 33601

Title DIRECTOR
Name GARDNER, PETER JUSTIN
Address P. O. BOX 1514
City-State-Zip: TAMPA FL 33601-1514

Title DIRECTOR
Name DELAVERGNE, JOHN T
Address 1114 W CASS ST
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name TUTTLE, ROBERT BURTON
Address 1114 W CASS ST
City-State-Zip: TAMPA FL 33606

Title DIRECTOR
Name GARDNER, T. TRUETT
Address 1114 W CASS ST
City-State-Zip: TAMPA FL 33606