

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706124

Entity Name: TAMPA NEW AUTO DEALERS ASSOCIATION, INC.

Current Principal Place of Business:

6205 WILD ORCHID DRIVE
LITHIA, FL 33547

Current Mailing Address:

6205 WILD ORCHID DRIVE
LITHIA, FL 33547 US

FEI Number: 59-1059589

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCELHENY, ROBERT F
6205 WILD ORCHID DRIVE
LITHIA, FL 33547 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 EVP, ED
Name MCELHENY, ROBERT F
Address 6205 WILD ORCHID DRIVE
City-State-Zip: LITHIA FL 33547

Title SECRETARY, TREASURER
Name PARKS, RON
Address 10505 N. FLORIDA AVE.
City-State-Zip: TAMPA FL 33612

Title DIRECTOR
Name HILL, GRAHAM
Address 5300 EAGLESTON BLVD.
City-State-Zip: WESLEY CHAPEL FL 33544

Title VP
Name GHIOTO III, RALPH III
Address 3308 W HILLSBOROUGH AVE.
City-State-Zip: TAMPA FL 33614-5802

Title PRESIDENT
Name RIVARD, CADE
Address 9740 ADAMO DRIVE
City-State-Zip: TAMPA FL 33619

Title DIRECTOR
Name ROGERS, KELLY
Address 11333 N. FLORIDA AVE.
City-State-Zip: TAMPA FL 33612

Title DIRECTOR
Name HOPKINS, TERALD
Address 10715 US HWY 19
City-State-Zip: PORT RICHEY FL 34668

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: ROBERT F MCELHENY

EVP

03/26/2020

Electronic Signature of Signing Officer/Director Detail

Date