

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 708704

**Entity Name:** TAMPA BAY BUILDERS ASSOCIATION, INC.

**Current Principal Place of Business:**

512 E KENNEDY BLVD  
TAMPA, FL 33602

**Current Mailing Address:**

512 E KENNEDY BLVD  
TAMPA, FL 33602 US

**FEI Number:** 59-0735336

**Certificate of Status Desired:** No

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

DOERFEL, JENNIFER L  
512 E KENNEDY BLVD  
TAMPA, FL 33602 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            PRES  
Name            STARLING, JASON  
Address        512 E KENNEDY BLVD  
City-State-Zip: TAMPA FL 33602

Title            VP  
Name            GIBBONS, WILLIAM STEWART  
Address        512 E KENNEDY BLVD  
City-State-Zip: TAMPA FL 33602

Title            VP  
Name            APPENZELLER, KEITH  
Address        512 E KENNEDY BLVD  
City-State-Zip: TAMPA FL 33602

Title            TREA  
Name            CAMPBELL, MICHELLE  
Address        512 E KENNEDY BLVD  
City-State-Zip: TAMPA FL 33602

Title            EVP  
Name            DOERFEL, JENNIFER  
Address        512 E KENNEDY BLVD  
City-State-Zip: TAMPA FL 33602

Title            SECR  
Name            MORROW, EVERETT  
Address        512 E KENNEDY BLVD  
City-State-Zip: TAMPA FL 33602

*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:** JENNIFER DOERFEL

**EXECUTIVE VP**

**04/28/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date