## 2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 710419** 

Entity Name: MACDONALD TRAINING CENTER, INC.

**FILED** Apr 18, 2014 **Secretary of State** CC6092938861

## **Current Principal Place of Business:**

5420 W. CYPRESS ST TAMPA FL 33607

## **Current Mailing Address:**

5420 W. CYPRESS ST TAMPA FL 33607 US

FEI Number: 59-0777827 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

FREYVOGEL, JAMES M

KELLY, PETER J 1801 N. HIGHLAND AVENUE 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:

Name

Title

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title Title **CHAIRMAN** 

8731 CITIZENS DRIVE 5420 W. CYPRESS ST Address Address

SUITE 340

GUTMAN, JACK

TAMPA FL 33607 City-State-Zip: City-State-Zip: NEW PORT RICHEY FL 34654-5572

Name

VC

Title **SECRETARY** Name WOOD, THOMAS M Name CASTILLO, ERIC

Address 101 E KENNEDY BLVD # 2800 2502 W. JETTON AVE. Address

City-State-Zip: TAMPA FL 33602 City-State-Zip: TAMPA FL 33629-5323

Title VC

Title **TREASURER** CANTOR FOGARTY, RACHEL Name

Name CASKEY, J. RICHARD

3023 EASTLAND BLVD Address Address 777 S. HARBOUR ISLAND BLVD. SUITE 110

SUITE 215

City-State-Zip: CLEARWATER FL 33761 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: JAMES M. FREYVOGEL

PRESIDENT/CEO

04/18/2014