

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 18, 2016
Secretary of State
CC7972523575

Entity Name: MACDONALD TRAINING CENTER, INC.

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:

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name FREYVOGEL, JAMES M
Address 5420 W. CYPRESS ST
City-State-Zip: TAMPA FL 33607

Title CHAIRMAN
Name WOOD, THOMAS M
Address 101 E KENNEDY BLVD # 2800
City-State-Zip: TAMPA FL 33602

Title ASST. SECRETARY
Name CANTOR FOGARTY, RACHEL
Address 3023 EASTLAND BLVD
SUITE 110
City-State-Zip: CLEARWATER FL 33761

Title VC
Name QUAM, DARRIN
Address 401 E JACKSON STREET
SUITE 2200
City-State-Zip: TAMPA FL 33602

Title VC
Name GUTMAN, JACK
Address 8731 CITIZENS DRIVE
SUITE 340
City-State-Zip: NEW PORT RICHEY FL 34654-5572

Title SECRETARY
Name CASTILLO, ERIC
Address 2502 W. JETTON AVE.
City-State-Zip: TAMPA FL 33629-5323

Title TREASURER
Name CASKEY, J. RICHARD
Address 777 S. HARBOUR ISLAND BLVD.
SUITE 215
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

04/18/2016

Electronic Signature of Signing Officer/Director Detail

Date