

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 724051

**FILED**  
**Feb 20, 2017**  
**Secretary of State**  
**CC9515554603**

**Entity Name:** TAMPA, FLORIDA CHAPTER OF THE NATIONAL ASSOCIATION OF WOMEN IN CONSTRUCTION, INC.

**Current Principal Place of Business:**

601 BAYSHORE BLVD  
SUITE 720  
TAMPA, FL 33606

**Current Mailing Address:**

P. O. BOX 152955  
TAMPA, FL 33684 US

**FEI Number: 23-7061089**

**Certificate of Status Desired: No**

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

DEGRAVE, HEATHER  
601 BAYSHORE BLVD  
SUITE 720  
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: HEATHER DEGRAVE**

**02/20/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name DEGRAVE, HEATHER  
Address P. O. BOX 152955  
City-State-Zip: TAMPA FL 33684

Title V  
Name HANSON, JILL  
Address P. O. BOX 152955  
City-State-Zip: TAMPA FL 33684

Title T  
Name GALIPAULT, BRITT  
Address P. O. BOX 152955  
City-State-Zip: TAMPA FL 33684

Title S  
Name MORGAN, HILARY  
Address P. O. BOX 152955  
City-State-Zip: TAMPA FL 33684

*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: BRITT GALIPAULT**

**TREASURER**

**02/20/2017**

Electronic Signature of Signing Officer/Director Detail

Date