

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739609

FILED
Apr 20, 2018
Secretary of State
CC6870976030

Entity Name: ST. CHAD'S EPISCOPAL CHURCH OF TAMPA, FLORIDA, INC.

Current Principal Place of Business:

5609 NORTH ALBANY AVE
TAMPA, FL 33603

Current Mailing Address:

5609 NORTH ALBANY AVE
TAMPA, FL 33603

FEI Number: 59-2859632

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RIVERA, ISHMAEL
5609 NORTH ALBANY AVE
TAMPA, FL 33603 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: ISHMAEL RIVERA

04/20/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HEWITT, DAVID
Address 5609 NORTH ALBANY AVE
City-State-Zip: TAMPA FL 33603

Title TREASURER
Name WHITE, DIXIE
Address 5609 NORTH ALBANY AVE
City-State-Zip: TAMPA FL 33603

Title OFFICER, SENIOR WARDEN
Name RIVERA, ISHMAEL
Address 5609 NORTH ALBANY AVE
City-State-Zip: TAMPA FL 33603

Title DIRECTOR, COMMITTEE CLERK
Name DRAKE, MARILYN
Address 5609 NORTH ALBANY AVE
City-State-Zip: TAMPA FL 33603

Title DIRECTOR
Name NEUMEIER, BURTON DR.
Address 5609 NORTH ALBANY AVE
City-State-Zip: TAMPA FL 33603

Title DIRECTOR
Name WILSON, ANNETTE
Address 5609 NORTH ALBANY AVE
City-State-Zip: TAMPA FL 33603

Title DIRECTOR, JUNIOR WARDEN
Name HUMBERT, HENRY
Address 5609 NORTH ALBANY AVE
City-State-Zip: TAMPA FL 33603

Title DIRECTOR
Name MILLER, VALERIE
Address 5609 N ALBANY AVE
City-State-Zip: TAMPA FL 33603

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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: ISHMAEL RIVERA

SENIOR WARDEN

04/20/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name GONZALEZ, LISA

Address 5609 NORTH ALBANY AVE

City-State-Zip: TAMPA FL 33603