

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740209

FILED
Jan 30, 2024
Secretary of State
1874283914CC**Entity Name:** UPPER TAMPA BAY REGIONAL CHAMBER OF COMMERCE,
INC.**Current Principal Place of Business:**101 STATE ST W
SUITE 1
OLDSMAR, FL 34677**Current Mailing Address:**101 STATE ST W
SUITE 1
OLDSMAR, FL 34677 US**FEI Number: 59-2268316****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HOWE, MARK
101 STATE STREET W.
SUITE 1
OLDSMAR, FL 34677 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 DIRECTOR
Name GRIMES, SANIDE
Address 3939 TAMPA RD
City-State-Zip: OLDSMAR FL 34677Title DIRECTOR
Name LIGHTSEY, MARK
Address 11164 WINDSOR PLACE CIR
City-State-Zip: TAMPA FL 33626Title DIRECTOR
Name SANDERS, JASON
Address 101 BAYVIEW BLVD S
City-State-Zip: OLDSMAR FL 34677Title DIRECTOR
Name ORMISTON, DAVID
Address 800 TARPON WOODS BLVD
City-State-Zip: PALM HARBOR FL 34685Title DIRECTOR
Name KILTY, JERRY
Address 2519 MCMULLEN BOOTH RD
510Q
City-State-Zip: CLEARWATER FL 33761Title DIRECTOR
Name POULTER, JAMES
Address 101 STATE ST W
City-State-Zip: OLDSMAR FL 34677Title DIRECTOR
Name GEORGE, KARL JR
Address 101 STATE ST W
City-State-Zip: OLDSMAR FL 34677Title PRESIDENT/CEO
Name HOWE, MARK
Address 101 STATE ST W
SUITE 1
City-State-Zip: OLDSMAR FL 34677**Continues on page 2**

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: MARK HOWE**CEO/PRESIDENT****01/30/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KING, THOMAS A JR.
Address 101 STATE ST W
SUITE 1
City-State-Zip: OLDSMAR FL 34677

Title DIRECTOR
Name DANKS, ANDREW
Address 101 STATE ST W
SUITE 1
City-State-Zip: OLDSMAR FL 34677

Title DIRECTOR
Name LE, QUYEN
Address 101 STATE ST W
SUITE 1
City-State-Zip: OLDSMAR FL 34677

Title DIRECTOR
Name CURRY, JEVON
Address 101 STATE ST W
SUITE 1
City-State-Zip: OLDSMAR FL 34677

Title CHAIRMAN
Name BALLARD, JAIME
Address 101 STATE ST W
SUITE 1
City-State-Zip: OLDSMAR FL 34677

Title DIRECTOR
Name NASTASI, JASON
Address 101 STATE ST W
SUITE 1
City-State-Zip: OLDSMAR FL 34677

Title DIRECTOR
Name MCKINLEY, DAVID M
Address 101 STATE STREET, WEST
SUITE 1
City-State-Zip: OLDSMAR FL 34677

Title DIRECTOR
Name ASSELIN, MAJOR
Address 101 STATE ST W
SUITE 1
City-State-Zip: OLDSMAR FL 34677