

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763611

Entity Name: NAIOP TAMPA BAY CHAPTER, INC.**Current Principal Place of Business:**4205 W BAY VIEW AVENUE
TAMPA, FL 33611**Current Mailing Address:**4205 W. BAY VIEW AVENUE
TAMPA, FL 33611 US**FEI Number: 59-2504370****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BOKOR, KELSEY
4205 W BAY VIEW AVENUE
TAMPA, FL 33611 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: KELSEY BOKOR****05/19/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name ALDEN, LAURIE
Address 3111 WEST DR. MARTIN LUTHER
KING BLVD.
SUITE 300
City-State-Zip: TAMPA FL 33607

Title IMMEDIATE PAST PRESIDENT
Name MCGEACHY, THOMAS
Address 14499 NORTH DALE MABRY HWY.
SUITE 200
City-State-Zip: TAMPA FL 33618

Title ED
Name BOKOR, KELSEY
Address 4205 W BAY VIEW AVENUE
City-State-Zip: TAMPA FL 33611

Title PRE, PRESIDENT
Name LAFAVE, OWEN
Address 601 BAYSHORE BOULEVARD
SUITE 830
City-State-Zip: TAMPA FL 33602

Title SECRETARY
Name CARVER, CHARLES
Address 201 BAYSHORE CENTER
2907 BAY TO BAY BLVD.
City-State-Zip: TAMPA FL 33629

Title TREASURER
Name RETTIG, BRIAN
Address 101 E. KENNEDY BLVD.
SUITE 1500
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: KELSEY BOKOR**EXECUTIVE DIRECTOR****05/19/2016**

Electronic Signature of Signing Officer/Director Detail

Date