### 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 766039** 

Entity Name: TAMPA BAY COMMUNITY DEVELOPMENT CORPORATION

FILED
Jan 28, 2016
Secretary of State
CC4792734668

## **Current Principal Place of Business:**

2139 N.E. COACHMAN ROAD - SUITE #1

CLEARWATER, FL 33765

## **Current Mailing Address:**

2139 N.E. COACHMAN ROAD - SUITE #1 CLEARWATER, FL 33765 US

FEI Number: 59-2252762 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

JACKSON, DEBRA D 2139 NE COACHMAN RD - SUITE #1 CLEARWATER, FL 33765 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: DEBRA D JACKSON 01/28/2016

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PRESIDENT / CEO Title SECRETARY

NameJONES, DAVID ENameGOODALL, REBBECCAAddress3224 SKENE TERRACEAddress7676 MONTAGUE LOOP

City-State-Zip: PALM HARBOR FL 34684 City-State-Zip: NEW PORT RICHEY FL 34655

TitleCHAIRMANTitleTREASURERNameKEMP, LINDANameSTIFF, JASONAddress710 CARILLON PKWYAddress2755 US ALT 19

City-State-Zip: ST PETERSBURG FL 33716 City-State-Zip: PALM HARBOR FL 34683

Title VP Title VP

Name VITALE, CARRIE Name JACKSON, DEBRA D

Address 2139 NE COACHMAN RD - SUITE #1 Address 2139 N.E. COACHMAN ROAD - SUITE #1

0.548.44.758 5. ......

City-State-Zip: CLEARWATER FL 33765 City-State-Zip: CLEARWATER FL 33765

Title VC

Name PHILPOT, MELVIN Name LATIMORE, CAPRENA

Address 3300 EXCHANGE PL (NP2A) Address 2139 N.E. COACHMAN ROAD - SUITE

City-State-Zip: LAKE MARY FL 32746

City-State-Zip: CLEARWATER FL 33765

#### 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: DAVID E JONES PRESIDENT 01/28/2016

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title ASST. TREASURER
Name MCFATE, JOSEPH R
Address 1749 STARDUST DR

City-State-Zip: CLEARWATER FL 33755