

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000004345

**FILED**  
**Mar 24, 2016**  
**Secretary of State**  
**CC2294546624**

**Entity Name:** TAMPA BAY WORKFORCE ALLIANCE, INC.

**Current Principal Place of Business:**

5100 W. KENNEDY BLVD.  
SUITE 300  
TAMPA, FL 33609

**Current Mailing Address:**

5100 W. KENNEDY BLVD.  
SUITE 300  
TAMPA, FL 33609 US

**FEI Number:** 59-3655316

**Certificate of Status Desired:** No

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

PEACHEY, EDWARD C  
5100 W. KENNEDY BLVD.  
SUITE 300  
TAMPA, FL 33609 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           BOARD CHAIR  
Name           KEARNEY, JOHN E SR.  
Address        5100 W. KENNEDY BLVD.  
                  SUITE 300  
City-State-Zip: TAMPA FL 33609

Title           BOARD TREASURER  
Name           EVANS, SHANNON  
Address        5100 W. KENNEDY BLVD.  
                  SUITE 300  
City-State-Zip: TAMPA FL 33609

Title           CHAIR-ELECT  
Name           PECK, RICHARD  
Address        5100 W. KENNEDY BLVD.  
                  SUITE 300  
City-State-Zip: TAMPA FL 33609

Title           BOARD VICE CHAIR BOCC  
Name           MURMAN, SANDRA  
Address        5100 W. KENNEDY BLVD.  
                  SUITE 300  
City-State-Zip: TAMPA FL 33609

Title           CEO  
Name           PEACHEY, EDWARD C  
Address        5100 W. KENNEDY BLVD.  
                  SUITE 300  
City-State-Zip: TAMPA FL 33609

Title           BOARD SECRETARY  
Name           BUTLER, SEAN  
Address        5100 W. KENNEDY BLVD.  
                  SUITE 300  
City-State-Zip: TAMPA FL 33609

*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:** EDWARD C PEACHEY

**PRESIDENT / CEO**

**03/24/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date