

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000004528

**Entity Name:** TAMPA BAY BLACK HERITAGE FESTIVAL, INC.**Current Principal Place of Business:**3911 N. 34TH STREET  
UNIT B  
TAMPA, FL 33610**Current Mailing Address:**P. O. BOX 16622  
TAMPA, FL 33687**FEI Number: 59-3710725****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JACKSON, RUBY  
7605 N. 53RD STREET  
TAMPA, FL 33617 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 CO-CHAIR / TREASURER

Name JACKSON, RUBY N

Address 7605 N. 53RD STREET

City-State-Zip: TAMPA FL 33617

Title BOARD MEMBER

Name MOORE, FREDDIE

Address 4010 W SPRUCE ST

City-State-Zip: TAMPA FL 33607

Title CO-CHAIRMAN

Name SANDERS, WILLIAMS

Address 3911 N. 34TH STREET, UNIT B

City-State-Zip: TAMPA FL 33610

Title BOARD MEMBER

Name WASHINGTON, MICHAEL

Address 11920 SNAPDRAGON ROAD

City-State-Zip: TAMPA FL 33635

Title BOARD MEMBER

Name HICKS, CONNIE

Address 26837 STILLBROOK DRIVE

City-State-Zip: WESLEY CHAPEL FL 33544

Title BOARD MEMBER

Name TROTMAN, WILLIAM

Address 3407 E. 26TH STREET

City-State-Zip: TAMPA FL 33605

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: RUBY JACKSON****CO-CHAIR****01/17/2018**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date