

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008019

FILED
Feb 04, 2016
Secretary of State
CC2399680056

Entity Name: REGIONAL COOPERATIVE ALLIANCE, INC.

Current Principal Place of Business:

4000 GATEWAY CENTRE BLVD
SUITE 100
PINELLAS PARK, FL 33782

Current Mailing Address:

4000 GATEWAY CENTRE BLVD
SUITE 100
PINELLAS PARK, FL 33782 US

FEI Number: 66-0033581

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SULLIVAN, SEAN T EXEC DIR
4000 GATEWAY CENTRE BLVD
SUITE 100
PINELLAS PARK, FL 33782 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: SEAN T. SULLIVAN

02/04/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name MINNING, BOB
Address 120-108TH AVE.
City-State-Zip: TREASURE ISLAND FL 33706

Title D
Name TODD, BARBARA S
Address 8462 35TH AVENUE NORTH
City-State-Zip: SAINT PETERSBURG FL 33710

Title TREASURER
Name LONG, JANET
Address 315 COURT STREET
5TH FLOOR
City-State-Zip: CLEARWATER FL 33756

Title D
Name MATTHEWS, BOB
Address 7331 111TH STREET NORTH
City-State-Zip: SEMINOLE FL 33772

Title CHAIRMAN
Name BROWN, WOODY
Address 201 HIGHLAND AVE.
City-State-Zip: LARGO FL 33779

Title VC
Name ROFF, PATRICK
Address 101 OLD MAIN STREET
City-State-Zip: BRADENTON FL 34205

Title DIRECTOR
Name DISABATINO, ROBIN
Address PO BOX 1000
City-State-Zip: BRADENTON FL 34206

Title DIRECTOR
Name EDWARDS, ROBERT PETE
Address 510 E HARRISON ST
APT 305
City-State-Zip: TAMPA FL 33602

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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: SEAN T SULLIVAN

EXECUTIVE DIRECTOR

02/04/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KITCHEN, RONALD JR
Address 110 N APOKA AVE
City-State-Zip: INVERNESS FL 34450

Title DIRECTOR
Name SCHOCK, TIM
Address 4212 W BEACHWAY DR
City-State-Zip: TAMPA FL 33609

Title CEO
Name SULLIVAN, SEAN T
Address 3165 GRAND AVE
APT 103
City-State-Zip: PINELLAS PARK FL 33782

Title DIRECTOR
Name ROWDEN, DIANE
Address 10350 FULTON AVE
City-State-Zip: WEEKI WACHEE FL 34613

Title DIRECTOR
Name WELLS, MIKE
Address 8731 CITIZENS DR
City-State-Zip: NEW PORT RICHEY FL 34654