

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005710

Entity Name: UMA OF TAMPA, INC

Current Principal Place of Business:

3309 JAP TUCKER ROAD
PLANT CITY, FL 33566

Current Mailing Address:

3309 JAP TUCKER ROAD
PLANT CITY, FL 33566

FEI Number: 74-3050800

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KHAN, AJMAL E
3309 JAP TUCKER ROAD
PLANT CITY, FL 33566 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 P
Name ALYAH PAT, CRUSE
Address 7415 SAVANNAH LANE
City-State-Zip: TAMPA FL 33637

Title VP
Name SCOTT W, GORDON
Address 4728 COUNTRY HILLS BLVD.
City-State-Zip: PLANT CITY FL 33563

Title T
Name KHAN, AJMAL E
Address 3309 JAP TUCKER ROAD
City-State-Zip: PLANT CITY FL 33566

Title S
Name KHAN, JOAN Y
Address 3309 JAP TUCKER ROAD
City-State-Zip: PLANT CITY FL 33566

Title AT
Name WASI, GERALD A SR.
Address 2103 E TIMBERLANE DRIVE
City-State-Zip: PLANT CITY FL 33563

Title AS
Name SILVA, NAGI
Address 6419 JACQUELINE ARBOR DRIVE
City-State-Zip: TEMPLE TERRACE FL 33617

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: KHAN, AJMAL E

TREASURER/ACCOUNTANT 03/08/2022
NT

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date