

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002439

Entity Name: MISSION TAMPA, INC.

Current Principal Place of Business:

801 EAST HILLSBOROUGH AVENUE
TAMPA, FL 33604

Current Mailing Address:

801 EAST HILLSBOROUGH AVENUE
TAMPA, FL 33604

FEI Number: 20-0836960

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLLEY, JEFFREY
801 EAST HILLSBOROUGH AVENUE
TAMPA, FL 33604 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: JEFFREY HOLLEY

05/13/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, MISSION TAMPA
Name HOLLEY, JEFFREY
Address 801 EAST HILLSBOROUGH AVENUE
City-State-Zip: TAMPA FL 33604

Title CHAIRMAN
Name ADAMS, BRANT
Address 801 EAST HILLSBOROUGH AVENUE
City-State-Zip: TAMPA FL 33604

Title TREASURER
Name ATANASOFF, JESSINYA
Address 801 E HILLSBOROUGH AVE
City-State-Zip: TAMPA FL 33604

Title SECRETARY
Name HOLLEY, NELDA
Address 5139 NASHVILLE
City-State-Zip: TAMPA FL 33624

Title DIRECTOR
Name LEFEVRE, PATRICA
Address 5306 N. NEBRASKA
City-State-Zip: TAMPA FL 33604

Title DIRECTOR, MISSION SMILES
Name BARLOW, KATHLEEN L. DR.
Address 16020 PIDDIN POND LN.
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name ATCHINSON, THOMAS
Address 1402 E. CHILKOOT
City-State-Zip: TAMPA FL 33612

Title DIRECTOR
Name BATTEN , JOHN W III
Address 2005 GREENMEADOW DR.
City-State-Zip: LUTZ FL 33549

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: JEFFREY HOLLEY

DIRECTOR

05/13/2020

Electronic Signature of Signing Officer/Director Detail

Date