2018 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 02/23/2018

Electronic Signature of Registered Agent

Officer/Director Detail :

Title DIRECTOR Title CHAIRMAN

Name HOLLEY, JEFFREY Name ADAMS, BRANT

Address 801 EAST HILLSBOROUGH AVENUE Address 801 EAST HILLSBOROUGH AVENUE

City-State-Zip: TAMPA FL 33604 City-State-Zip: TAMPA FL 33604

Title **SECRETARY** Title **TREASURER** Name HOLLEY, NELDA Name MORIN, BRETT Address 5139 NASHVILLE Address 608 LIGHTSEY LANE TAMPA FL 33624 City-State-Zip: LUTZ FL 33548 City-State-Zip:

TitleDIRECTOR, COOKS HATTitleDIRECTOR, MISSION SMILESNameLEFEVRE, PATRICANameBARLOW, KATHLEEN L. DR.Address5306 N. NEBRASKAAddress16020 PIDDIN POND LN.

City-State-Zip: TAMPA FL 33604 City-State-Zip: TAMPA FL 33618

Title DIRECTOR

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

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 D

Electronic Signature of Signing Officer/Director Detail

02/23/2018

FILED Feb 23, 2018

Secretary of State

CC4701888015

Date

Date