2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002439

Entity Name: MISSION TAMPA, INC.

Current Principal Place of Business:

5802 N HIMES AVE
TAMPA, FL 33614

Current Mailing Address:

5802 N HIMES AVE
TAMPA, FL 33614 US

FEI Number: 20-0836960

Name and Address of Current Registered Agent:

HOLLEY, JEFFREY
5802 N HIMES AVE
TAMPA, FL 33614 US

Certificate of Status Desired: Yes

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   01/03/2022

Electronic Signature of Registered Agent   Date

Officer/Director Detail :

Title	DIRECTOR, MISSION TAMPA	Title	CHAIRMAN
Name	HOLLEY, JEFFREY	Name	ADAMS, BRANT
Address	5139 NASHVILLE	Address	5203 TARALAWN COURT
City-State-Zip:	TAMPA FL 33624	City-State-Zip:	TAMPA FL 33618
Title	TREASURER	Title	SECRETARY
Name	ATANASOFF, JESSINYA	Name	HOLLEY, NELDA
Address	5802 N HIMES AVE	Address	5139 NASHVILLE
City-State-Zip:	TAMPA FL 33614	City-State-Zip:	TAMPA FL 33624
Title	DIRECTOR	Title	DIRECTOR, MISSION SMILES
Name	LEFEVRE, PATRICA	Name	BARLOW, KATHLEEN L. DR.
Address	5802 N HIMES AVE	Address	16020 PIDDLIN POND LANE
City-State-Zip:	TAMPA FL 33614	City-State-Zip:	TAMPA FL 33618
Title	DIRECTOR	Title	DIRECTOR
Name	ATCHINSON, THOMAS	Name	BATTEN , JOHN W III
Address	1402 E. CHILKOOT	Address	2005 GREENMEADOW DR.
City-State-Zip:	TAMPA FL 33612	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   01/03/2022

Electronic Signature of Signing Officer/Director Detail   Date