

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000011571

**Entity Name:** HILLSBOROUGH COUNTY 4-H YOUTH FOUNDATION, INC.

**Current Principal Place of Business:**

5339 SOUTH COUNTY ROAD 579  
SEFFNER, FL 33584

**Current Mailing Address:**

5339 SOUTH COUNTY ROAD 579  
SEFFNER, FL 33584 US

**FEI Number:** 20-1466250

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHEFFIELD, SCOTT C  
5339 SOUTH COUNTY ROAD  
SEFFNER, FL 33584 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:** SCOTT SHEFFIELD

05/05/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MCKINNEY, MICHAEL  
Address        1850 RAVENRIDGE ST  
City-State-Zip: WESLEY CHAPEL FL 33543

Title            VP  
Name            HOLCOMB, GENE  
Address        905 GAMBIT PLACE  
City-State-Zip: SEFFNER FL 33584

Title            TREASURER  
Name            SHEFFIELD, SCOTT C  
Address        13568 CIRCA CROSSING DRIVE  
City-State-Zip: LITHIA FL 33547

Title            SECRETARY  
Name            TOMPKINS, BETTY JO  
Address        9612 REDWOOD BLVD  
                  P.O. BOX 888  
City-State-Zip: BRANDON FL 33509

*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:** SCOTT C SHEFFIELD

**TREASURER AND  
REGISTERED AGENT**

05/05/2020

Electronic Signature of Signing Officer/Director Detail

Date