

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005054

Entity Name: THE TAMPA BAY HISTORY CENTER FOUNDATION, INC.**Current Principal Place of Business:**801 WATER STREET
TAMPA, FL 33602**Current Mailing Address:**801 WATER STREET
TAMPA, FL 33602 US**FEI Number:** 20-2900795**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ROBERTS, CLARENCE J
801 WATER STREET
TAMPA, FL 33602 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	T
Name	LYKES, JOSEPH T III
Address	2910 HAWTHORNE ROAD
City-State-Zip:	TAMPA FL 33611

Title	TT
Name	ROBBINS, R. JAMES JR.
Address	101 E KENNEDY BLVD., STE. 3700
City-State-Zip:	TAMPA FL 33602

Title	CT
Name	WHITING, PAUL L JR.
Address	511 W. BAY STREET STE. 310
City-State-Zip:	TAMPA FL 33606

Title	VCT
Name	TOUCHTON, JOHN
Address	4211 W. BOY SCOUT BLVD., STE. 660
City-State-Zip:	TAMPA FL 33607-5757

Title	T
Name	PITINO, CHRISTOPHER
Address	24 S. TREASURE DR.
City-State-Zip:	TAMPA FL 33609-3535

Title	ST
Name	SOUZA, KENNETH A
Address	9662 GRETNA GREEN DRIVE
City-State-Zip:	TAMPA FL 33626

Title	T
Name	SNYDER, BET
Address	3308 SIERRA CIRCLE
City-State-Zip:	TAMPA FL 33629

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: PAUL L WHITING, JR.

CT

04/09/2021

Electronic Signature of Signing Officer/Director Detail_____
Date