

**2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N06000001068

**Entity Name:** CITY OF TAMPA BLACK HISTORY COMMITTEE, INC.

**Current Principal Place of Business:**

315 EAST KENNEDY BLVD  
TAMPA, FL 33602

**Current Mailing Address:**

POST OFFICE BOX 1782  
TAMPA, FL 33601

**FEI Number:** 45-0540281

**Certificate of Status Desired:** No

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

DOCK, LACHONE  
1400 N BOULEVARD  
TAMPA, FL 33607 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:** LACHONE DOCK

08/25/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TR  
Name DOCK, LACHONE  
Address 1400 N. BOULEVARD  
City-State-Zip: TAMPA FL 33607

Title PARL  
Name CRUM, FRANK  
Address 306 EAST JACKSON STREET  
City-State-Zip: TAMPA FL 33602

Title P  
Name HOUSE, KATRINA  
Address 306 EAST JACKSON STREET  
City-State-Zip: TAMPA FL 33602

Title VP  
Name PARKER, ARTHUR  
Address 4900 W LEMON STREET  
City-State-Zip: TAMPA FL 33609

Title TREASURER  
Name DOCK, LACHONE  
Address 1400 N BLVD  
City-State-Zip: TAMPA FL 33607

Title ADVISOR  
Name FOXX-KNOWLES, SHIRLEY  
Address 315 E KENNEDY BLVD  
City-State-Zip: TAMPA FL 33602

*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:** LACHONE DOCK

TREASURER

08/25/2022

Electronic Signature of Signing Officer/Director Detail

Date