

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N07000008421

**FILED**  
**Apr 27, 2023**  
**Secretary of State**  
**7510645529CC**

**Entity Name:** TAMPA REGIONAL INDUSTRIAL PARK OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

ATTN: LEGAL DEPARTMENT  
1800 WAZEE STREET SUITE 500  
DENVER, CO 80202

**Current Mailing Address:**

ATTN: LEGAL DEPARTMENT  
1800 WAZEE STREET SUITE 500  
DENVER, CO 80202 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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           VP, DIRECTOR  
Name           SACRO, MIKE  
Address        300 SOUTH ORANGE AVENUE  
                  SUITE 1110  
City-State-Zip: ORLANDO FL 32801

Title           TREA  
Name           SHARKEY, JANE  
Address        300 SOUTH ORANGE AVENUE  
                  SUITE 1110  
City-State-Zip: ORLANDO FL 32801

Title           PRES, DIRECTOR  
Name           BARNES, JOEY  
Address        300 SOUTH ORANGE AVENUE  
                  SUITE 1110  
City-State-Zip: ORLANDO FL 32801

Title           SEC  
Name           GASKILL, LISSETTE  
Address        300 SOUTH ORANGE AVENUE  
                  SUITE 1110  
City-State-Zip: ORLANDO FL 32801

Title           DIRECTOR  
Name           CALIGIURI, BRITTANY  
Address        300 SOUTH ORANGE AVENUE  
                  SUITE 1110  
City-State-Zip: ORLANDO FL 32801

*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: LISSETTE GASKILL**

**SECRETARY**

**04/27/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date