

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000008132

**Entity Name:** 800 BUFFALO ASSOCIATION, INC.

**Current Principal Place of Business:**

800 W DR MARTIN LUTHER KING JR BLVD  
1  
TAMPA, FL 33603

**Current Mailing Address:**

800 W DR MARTIN LUTHER KING JR BLVD  
1  
TAMPA, FL 33603

**FEI Number:** 26-3272750

**Certificate of Status Desired:** No

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

KRIZ, JR., FRANK K JR  
800 W DR MARTIN LUTHER KING JR BLVD  
1  
TAMPA, FL 33603 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 D, TREASURER  
Name KRIZ, FRANK K JR.  
Address 800 W DR MARTIN LUTHER KING JR  
BLVD  
UNIT 1  
City-State-Zip: TAMPA FL 33603

Title PRESIDENT  
Name CORCES, CHARLES  
Address 800 W DR MARTIN LUTHER KING JR  
BLVD  
UNIT 3  
City-State-Zip: TAMPA FL 33603

Title DIRECTOR, SECRETARY  
Name AYER-COLE, JAWAN  
Address 800 W DR MARTIN LUTHER KING JR  
BLVD  
UNIT 4  
City-State-Zip: TAMPA FL 33603

*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:** FRANK K KRIZ,

**TREASURE**

**01/30/2016**

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

\_\_\_\_\_  
Date