2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006321

Entity Name: THE JACKSON HOUSE FOUNDATION, INC.

Current Principal Place of Business:

851 EAST ZACK STREET TAMPA, FL 36602

Current Mailing Address:

P.O. BOX 173076 TAMPA, FL 33672

FEI Number: 46-1008745

Name and Address of Current Registered Agent:

GILMORE, RICARDO LESQ 201 EAST KENNEDY BLVD STE 600 FIFTH THIRD PLAZA TAMPA, FL 33602 US

FILED Mar 17, 2023

Secretary of State

1395204633CC

Date

Certificate of Status Desired: Yes

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

Officer/Director Detail :

Office/Director Detail :					
Title	DIRECTOR	Title	DIRECTOR		
Name	CRUSE, PATRICIA D	Name	JACKSON , ANTIONETTE		
Address	13040 TAMPA OAKS BLVD. UNIT 1201 TEMPLE TERRACE FL 33637	Address	9135 MAGGIE COURT		
City-State-Zip:		City-State-Zip:	SAN ANTONIO TX 78240-2194		
Title	VICE CHAIR	Title	DIRECTOR		
		Name	ROBINSON, DESIREE D		
Name Address	KING, PENDA 3000 47TH AVENUE S.	Address	3208 E. LINDELL AVENUE APT. B		
City-State-Zip:	ST. PETERSBURG FL 33672	City-State-Zip:	TAMPA FL 33610		
Title	CHAIR	Title	SECRETARY		
Name	COLLINS, CAROLYN DR	Name	MATTHEWS, IRENE		
Address	4002 W LASALLE STREET	Address	1313 E. CONOVER STREET		
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33603		
Title	DIRECTOR	Title	DIRECTOR		
Name	PULLER, WILLIAM M	Name	HARRIS, AALIYAH		
Address	4133 CORTEZ WAY SOUTH	Address	1932 ERIN BROOKE DRIVE		
City-State-Zip:	ST PETERSBURG FL 33712	City-State-Zip:	VALRICO FL 33594		

Continues on page 2

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: DR. CAROLYN COLLINS

BOARD OF DIRECTOR 03/17/2023 CHAIR

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	LUMPKIN, URSULA	Name	MASSEY, ALEX
Address	15115 BUCKHORN CT. 204 D	Address	2007 17TH AVENUE
City-State-Zip:	LUTZ FL 33559	City-State-Zip:	TAMPA FL 33605
Title	DIRECTOR	Title	ASST. TREASURER
Name	COLE, JAYLIN	Name	JEFFERSON, TAMARA
Address	305 S. RIVERHILLS DRIVE	Address	1018 E. 32ND AVENUE
City-State-Zip:	TEMPLE TERRACE FL 33617	City-State-Zip:	TAMPA FL 33603
Title	DIRECTOR	Title	DIRECTOR
Name	DAWSON, PATRICIA	Name	WILLIAMS, RONNIE
Address	1211 N. WEST SHORE BLVD. STE. 307	Address	109 W. CREST AVENUE
City-State-Zip:	TAMPA FL 33607-4615	City-State-Zip:	TAMPA FL 33603