#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000005745

Entity Name: TAMPA HISPANIC BAR ASSOCIATION, INC.

FILED Apr 25, 2017 Secretary of State CC0925805082

## **Current Principal Place of Business:**

501 E. KENNEDY BLVD., SUITE 1260

TAMPA, FL 33602

## **Current Mailing Address:**

P. O. BOX 2714 TAMPA FL 33601

FEI Number: 46-3098503 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

OLIVEROS, ANDRES N 4200 W. CYPRESS STREET, SUITE 144 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title TREASURER Title I

NameVALDES, BARTNameGONZALEZ, RICARDOAddress609 WEST HORATIO STAddress701 N. FRANKLIN ST.City-State-Zip:TAMPA FL 33606City-State-Zip:TAMPA FL 33602

Title PRESIDENT Title IPP

Name IURATO, JENAY Name CORTES HODZ, VIVIAN

Address P.O. BOX 2714 Address P.O. BOX 2714

City-State-Zip: TAMPA FL 33606 City-State-Zip: TAMPA FL 33601

Title D Title DIRECTOR

NameBARBAS, STEPHEN MNameVILLOCH, ALFREDAddress1802 W. CLEVELAND STREETAddressP.O. BOX 2714City-State-Zip:TAMPA FL 33606City-State-Zip:TAMPA FL 33601

Title V Title S

Name VIERA, LUIS E Name OLIVEROS, ANDRES N

Address 113 S. ARMENIA AVE. Address 4200 W. CYPRESS ST., SUITE 144

City-State-Zip: TAMPA FL 33609 City-State-Zip: TAMPA FL 33607

#### 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: BART R VALDES TREASURER 04/25/2017

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title D

Name HERNANDEZ, RENE

Address P O BOX 30094

City-State-Zip: TAMPA FL 33630

Title D

Name GOMEZ, PATRICIA

Address P O BOX 340611

STE. 218

City-State-Zip: TAMPA FL 33634

Title D

Name BERNAL DIXON, LOURDES

Address 150 E. BLOOMINGDALE AVE.

STE. 115

City-State-Zip: TAMPA FL 33511

Title D

Name BERNAL, HERNANDO JR.

Address 6601 MEMORIAL HWY

SUITE 218

City-State-Zip: TAMPA FL 33615

Title D

Name FUEYO, RICHARD K

Address 101 E. KENNEDY BLVD.

STE. 2700

City-State-Zip: TAMPA FL 33602