

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000005875

**Entity Name:** HILLSBOROUGH COUNTY FIRE RESCUE FOUNDATION, INC

**FILED**  
**Feb 10, 2020**  
**Secretary of State**  
**3565768319CC**

**Current Principal Place of Business:**

9450 E. COLUMBUS DR.  
TAMPA, FL 33619

**Current Mailing Address:**

9450 E. COLUMBUS DR.  
TAMPA, FL 33619 US

**FEI Number: 46-3310942**

**Certificate of Status Desired: No**

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

CARNELL, LOUIS TODD  
9450 E. COLUMBUS DR.  
TAMPA, FL 33619 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:** LOUIS T. CARNELL

02/10/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            CARNELL, LOUIS  
Address        9450 E. COLUMBUS DR.  
City-State-Zip: TAMPA FL 33619

Title            SECRETARY  
Name            MCILRATH, VIVIAN  
Address        9450 E. COLUMBUS DR.  
City-State-Zip: TAMPA FL 33619

Title            VP  
Name            WOOD, MARY O  
Address        1225 MILLENNIUM PKWY.  
City-State-Zip: BRANDON FL 33511

Title            DIRECTOR  
Name            JONES, DENNIS  
Address        9450 E. COLUMBUS DR.  
City-State-Zip: TAMPA FL 33619

Title            DIRECTOR  
Name            JENSEN, CLYDE  
Address        9450 E. COLUMBUS DR.  
City-State-Zip: TAMPA FL 33619

Title            DIRECTOR  
Name            HAMRICK, MARGARET  
Address        9450 E. COLUMBUS DR.  
City-State-Zip: TAMPA FL 33619

Title            TREASURER  
Name            CERONE, MATTHEW  
Address        9450 E. COLUMBUS DR.  
City-State-Zip: TAMPA FL 33619

Title            DIRECTOR  
Name            RENNER, CHRISTY  
Address        9602 EAST HWY 92  
City-State-Zip: TAMPA FL 33610

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*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:** LOUIS TODD CARNELL

**PRESIDENT**

02/10/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            STEPP, TODD  
Address        9602 EAST HWY 92  
City-State-Zip: TAMPA FL 33610