#### **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000005875

Entity Name: HILLSBOROUGH COUNTY FIRE RESCUE FOUNDATION, INC

FILED Feb 10, 2021 Secretary of State 1057544267CC

## **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: Yes

### 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 02/10/2021

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

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

Title VP Title DIRECTOR

Name WOOD, MARY O Name JONES, DENNIS

Address 1225 MILLENNIUM PKWY. Address 9450 E. COLUMBUS DR. City-State-Zip: BRANDON FL 33511 City-State-Zip: TAMPA FL 33619

Title DIRECTOR Title DIRECTOR

NameJENSEN, CLYDENameHAMRICK, MARGARETAddress9450 E. COLUMBUS DR.Address9450 E. COLUMBUS DR.

City-State-Zip: TAMPA FL 33619 City-State-Zip: TAMPA FL 33619

Title TREASURER Title DIRECTOR

NameCERONE, MATTHEWNameRENNER, CHRISTYAddress9450 E. COLUMBUS DR.Address9602 EAST HWY 92City-State-Zip:TAMPA FL 33619City-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 CARNELL PRESIDENT 02/10/2021

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