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

DOCUMENT# N14000008229

Entity Name: CENTRAL FLORIDA NORML INC.

**Current Principal Place of Business:** 

1714 E 7TH AVE TAMPA, FL 33605

**Current Mailing Address:** 

1714 E 7TH AVE

TAMPA, FL 33605 US

FEI Number: 47-1806243 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CANO, CHRISTOPHER C 1529 WEST RIVER LANE 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

FILED Feb 07, 2020

**Secretary of State** 

6307642591CC

Officer/Director Detail:

TitleEXECUTIVE DIRECTORTitleDEPUTY DIRECTORNameCANO, CHRISTOPHERNameHERMIDA, CARLOSAddress1529 WEST RIVER LANEAddress2723 WEST HENRY AVECity-State-Zip:TAMPA FL 33603City-State-Zip:TAMPA FL 33614

Title DIRECTOR OF FINANCE Title DIRECTOR OF PUBLIC POLICY

Name LEWIS, TIFFANY LYNN Name STEIN, GARY J

Address 5415 DECATUR ST Address 7035 BELT LINK LOOP

City-State-Zip: ORLANDO FL 32807 City-State-Zip: WESLEY CHAPEL FL 33545

Title DIRECTOR OF EVENTS AND Title DIRECTOR OF COMMUNICATIONS

MARKETING Name PUFFENBARGER, BRETT
Name WEBB, LINDSEY Address 2326 NORTHERN LEAF ST
Address 5801 MARTA DRIVE City-State-Zip: ORLANDO FL 32817

City-State-Zip: TEMPLE TERRACE FL 33617

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: TIFFANY LEWIS FINANCE DIRECTOR 02/07/2020