

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000000169

Entity Name: NOPE OF HILLSBOROUGH, INC.**Current Principal Place of Business:**12501 CLENDENNING DRIVE
TAMPA, FL 33618**Current Mailing Address:**P. O. BOX 269271
TAMPA, FL 33688 US**FEI Number:** 47-2795721**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MARSOCCI, LEONARD
12501 CLENDENNING DRIVE
TAMPA, FL 33618 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:** LEONARD MARSOCCI

01/25/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name MARSOCCI, GERALDINE M
Address 12501 CLENDENNING DR.
City-State-Zip: TAMPA FL 33618

Title DS
Name SHIN, JENNIFER H
Address 6029 BEACON SHORES ST.
City-State-Zip: TAMPA FL 33616

Title PRESIDENT
Name VALDES, CATHY L
Address 9635 NORCHESTER CIRCLE
City-State-Zip: TAMPA FL 33647

Title DT
Name MARSOCCI, LEONARD D
Address 12501 CLENDENNING DR
City-State-Zip: TAMPA FL 33618

Title DIRECTOR
Name GODETTE KNOWLES, DEBRA L
Address 1515 WHISPER WIND LANE
City-State-Zip: OLDSMAR FL 34677

Title DIRECTOR
Name RODRIGUEZ, ALINA
Address 19576 COASTAL SHORE TERRACE
City-State-Zip: LAND O LAKES FL 34638

Title BOARD OF DIRECTOR
Name GRANT, CINDY
Address 2815 HENRY CIRCLE E.
B 1
City-State-Zip: TAMPA FL 33610

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: LEONARD MARSOCCI**TREASURER**

01/25/2022

Electronic Signature of Signing Officer/Director Detail

Date