## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000004806

Entity Name: DOMINICA ASSOCIATION OF TAMPA BAY, INC.

FILED Apr 26, 2018 Secretary of State CC2035846017

**Current Principal Place of Business:** 

9815 SOMERSET WIND DRIVE, APARTMENT 103

RIVERVIEW, FL 33578

## **Current Mailing Address:**

9815 SOMERSET WIND DRIVE, APARTMENT 103 RIVERVIEW, FL 33578

FEI Number: 81-1192382 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DOMINICA ASSOCIATION OF TAMPA BAY 9815 SOMERSET WIND DRIVE. APT 103

RIVERVIEW, FL 33578 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: DOREEN SHILLINGFORD 04/26/2018

Electronic Signature of Registered Agent Date

Officer/Director Detail:

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Title P Title VP

Name SHILLINGFORD, DOREEN Name ALEXANDER, ESTHER

Address 9815 SOMERSET WIND DRIVE, APT Address 9815 SOMERSET WIND DRIVE, APT

City-State-Zip: RIVERVIEW FL 33578 City-State-Zip: RIVERVIEW FL 33578

Title VP Title S

Name BEAUPIERRE, AUGUSTUS Name DOUGLAS, SOLANGE

Address 9815 SOMERSET WIND DRIVE, APT Address 9815 SOMERSET WIND DRIVE, APT

City-State-Zip: RIVERVIEW FL 33578 City-State-Zip: RIVERVIEW FL 33578

Title AMBR Title AMBR

Name JAMES, MELVIN Name ALEXANDER, MCDONALD

Address 9815 SOMERSET WIND DRIVE, APT Address 9815 SOMERSET WIND DRIVE, APT

City-State-Zip: RIVERVIEW FL 33578 City-State-Zip: RIVERVIEW FL 33578

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: DOREEN SHILLINGFORD

**PRESIDENT** 

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04/26/2018