

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000009465

Entity Name: ALTRUSA INTERNATIONAL OF TAMPA BAY, INC.**Current Principal Place of Business:**C/O SHARON E. MILLER
474 GOLDEN GATE DRIVE
LARGO, FL 33770**Current Mailing Address:**C/O SHARON E. MILLER
474 GOLDEN GATE DRIVE
LARGO, FL 33770 US**FEI Number:** 47-5257527**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MILLER, SHARON ELAINE
474 GOLDEN GATE DRIVE
LARGO, FL 33770 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:** SHARON E. MILLER

01/18/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name MILLER, SHARON
Address 474 GOLDEN GATE DRIVE
City-State-Zip: LARGO FL 33770

Title PRESIDENT
Name FREDETTE, GINA
Address 906 W. TERRACE DRIVE
City-State-Zip: PLANT CITY FL 33563

Title SECRETARY
Name HINTON, CHRISTINA T
Address 8707 DEEP MAPLE DRIVE
City-State-Zip: RIVERVIEW FL 33578

Title TD
Name MILLER, SHARON ELAINE
Address 474 GOLDEN GATE DRIVE
City-State-Zip: LARGO FL 33770

Title VP
Name FERNANDEZ, TERRI
Address PO BOX 10772
City-State-Zip: TAMPA FL 33679

Title D
Name FRANCES, JENNIFER
Address 301 NATIONAL ORANGE AVENUE
City-State-Zip: OLDSMAR FL 34677

Title DIRECTOR
Name FREDETTE, CAYLEE J.
Address 906 WEST TERRACE DRIVE
City-State-Zip: PLANT CITY FL 33563

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: SHARON E. MILLER

TREASURER

01/18/2018

Electronic Signature of Signing Officer/Director Detail

Date