,				
The above named	I entity submits this statement for the purpose of changing its	registered office or regis	tered agent, or both, in the State of Florida.	
SIGNATURE	E:			
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	Р	Title	Т	
Name	LYNCH, MARY	Name	MELENDEZ, ROCHEL	
Address	1014 ROWLAND PICKERT LANE	Address	415 DRUID HILLS ROAD	
City-State-Zip:	LUTZ FL 33548	City-State-Zip:	TEMPLE TERRACE FL 33617	
Title	SECRETARY			
Name	VAN VOORST, BONNIE			
Address	13911 CHERRY CREEK DRIVE			

13320 LAKE MAGDALENE BLVD TAMPA, FL 33618

DOCUMENT# N1600000579

Current Mailing Address:

13320 LAKE MAGDALENE BLVD TAMPA, FL 33618 US

Current Principal Place of Business:

FEI Number: 81-1400290

Name and Address of Current Registered Agent:

LYNCH, MARY 13320 LAKE MAGDALENE BLVD TAMPA, FL 33618 US

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: MARY LYNCH

City-State-Zip: TAMPA FL 33618

Date

Electronic Signature of Signing Officer/Director Detail

FILED Feb 07, 2024 Secretary of State

6880074740CC

Certificate of Status Desired: No

PRESIDENT

02/07/2024

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: TAMPA COVENANT HOMESCHOOLERS, INC.