

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED

DOCUMENT# N16000008148

Mar 18, 2023

Entity Name: MUTUAL AID DISASTER RELIEF INC

**Secretary of State
3928411853CC**

Current Principal Place of Business:

503 E. JACKSON STREET #318
TAMPA, FL 33602

Current Mailing Address:

503 E. JACKSON STREET #318
TAMPA, FL 33602 US

FEI Number: 81-3606763

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUNSON, JAMES
4210 WEST GRANADA ST
TAMPA, FL 33629 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

Officer/Director Detail :

Title P
Name DUNSON, JAMES R
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Title VP
Name MCDONALD, MARILYN
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Title SEC
Name RUBINCHIK, DEZERAY L
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Title T
Name CALLANAN, AMY
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Title DIR
Name ARANEDA, BARBARA
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name TOMPKINS, KENNETH
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name NORMAN, TYLER
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name GELVIN, ELIZABETH
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Continues on page 2

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: JAMES DUNSON

COFOUNDER

03/18/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GILMAN, LEAH
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name WYATT, BENJAMIN
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name TALLENT, PIXIE
Address 503 E. JACKSON STREET #318
City-State-Zip: TAMPA FL 33602