2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000006680

Entity Name: TB AFFORDABLE HOUSING, INC.

Current Principal Place of Business:

5300 WEST CYPRESS STR., STE. 200

TAMPA, FL 33607

Current Mailing Address:

5300 WEST CYPRESS STR., STE. 200 TAMPA, FL 33607 US

FEI Number: 82-2148522 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHADWICK, JAMES M 5300 WEST CYPRESS STR., STE. 200 TAMPA, FL 33607 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

FILED Mar 19, 2021

Secretary of State

8672370995CC

Officer/Director Detail :

Title D. VP Title D.S.T

LAMPE, DOUGLAS Name Name ATTKISSON, JAMES R

PO BOX 371 9600 KOGER BOULEVARD Address Address

STE 105

TERRA CEIA FL 34250 City-State-Zip: City-State-Zip: ST PETERSBURG FL 33702

Title D

Title BROWN, LARRY Name

Name JOHNSON, DAVID Address 5802 N OCCIDENT STREET

2799 FEATHER SOUND DRIVE Address City-State-Zip: TAMPA FL 33614

City-State-Zip: CLEARWATER FL 33762

Title D,P

Title **DIRECTOR** CLARKE, CARTER Name

Name CLARKE IV. CARTER Address 2655 ULMERTON ROAD Address 7600 131ST STREET

STE 122

City-State-Zip: SEMINOLE FL 33776 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR **DIRECTOR** Title Name ELLIS. ADAM Name ELEAZER. FORREST

Address 135 16TH AVENUE NE Address 2363 GULF TO BARY BLVD

200

ST PETERSBURG FL 33704 City-State-Zip: City-State-Zip: CLEARWATER FL 33765

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.

03/19/2021 SIGNATURE: CARTER CLARKE **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date