

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000006824

Entity Name: HILLSBOROUGH FIRE MUSEUM FOUNDATION, INC.**Current Principal Place of Business:**15961 N FLORIDA AVE
C
LUTZ, FL 33549**Current Mailing Address:**15961 N FLORIDA AVE
C
LUTZ, FL 33549 US**FEI Number:** 82-2133299**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NEVEL, ELIZABETH K. CHAIR OF BOARD
15961 N FLORIDA AVE
C
LUTZ, FL 33549 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:** ELIZABETH K. NEVEL

02/03/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name NEVEL, ELIZABETH K.
Address 15961 N FLORIDA AVE
 C
City-State-Zip: LUTZ FL 33549

Title VP
Name RESSLER, LOIS
Address 15961 N FLORIDA AVE
 C
City-State-Zip: LUTZ FL 33549

Title SECR
Name FREY, CHRISTOPHER
Address 15961 N FLORIDA AVE
 C
City-State-Zip: LUTZ FL 33549

Title TREASURER
Name SNOW, GEORGIANN
Address 15961 N FLORIDA AVE
 C
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name FRANCESCHINI, CHRIS
Address 15961 N FLORIDA AVE
 C
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name FREY, JEFF
Address 15961 N FLORIDA AVE
 C
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name FREY, JACLYN
Address 15961 N FLORIDA AVE
 C
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name FREY, KELLI
Address 15961 N FLORIDA AVE
 C
City-State-Zip: LUTZ FL 33549

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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: ELIZABETH K NEVEL

PRESIDENT

02/03/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HUGHES, NICOLETTE
Address 15961 N FLORIDA AVE
C
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name VALDES, ERIC
Address 15961 N FLORIDA AVE
C
City-State-Zip: LUTZ FL 33549