2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2014
Secretary of State
CC4679793367

DOCUMENT# N17967

Entity Name: VSA FLORIDA, INC.

Current Principal Place of Business:

4205 USF WILLOW DRIVE
BEH336
TAMPA, FL 33620

Current Mailing Address:

USF/VSA FLORIDA
4202 E. FOWLER AVENUE, EDU105
TAMPA, FL 33620

FEI Number: 59-2758321

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WINTERS, MARIAN
4202 E FOWLER AVENUE
EDU105
TAMPA, FL 33620 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	PD
Name	SROKA, SANDY
Address	601 EAST KENNEDY BOULEVARD
City-State-Zip:	TAMPA FL 33602

Title	TREA
Name	WILLS, ELIZABETH
Address	626 GOODWIN AVENUE
City-State-Zip:	NEW SMYRNA BEACH FL 32169

Title	D
Name	LITT, JUDY
Address	9806 NE 2ND AVENUE
City-State-Zip:	MIAMI SHORES FL 33138

Title	DIRECTOR
Name	HELLER, BILL
Address	USF ST. PETE 140 SEVENTH AVENUE SOUTH COQ201
City-State-Zip:	ST. PETERSBURG FL 33701

Title	VP
Name	ROCKHILL, MARSHA
Address	3344 DOUGLAS ROAD
City-State-Zip:	PANAMA CITY FL 32405

Title	D
Name	ESCALLON, ENRIQUE
Address	4371 SW 150 COURT
City-State-Zip:	MIAMI FL 33185

Title	DIRECTOR
Name	GALLO, SUSAN
Address	4927 APACHE AVENUE
City-State-Zip:	JACKSONVILLE FL 32210

Title	DIRECTOR
Name	LEWIS, MORGAN
Address	4501 ROCKBRIDGE HOLLOW
City-State-Zip:	TALLAHASSEE FL 32309

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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: SANDY SROKA BOARD PRESIDENT 01/14/2014

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MOLLOY, KATIE
Address	GREENBERG TRAURIG 625 EAST TWIGGS STREET SUITE 100
City-State-Zip:	TAMPA FL 33602

Title	DIRECTOR
Name	MORRIS, MERRY LYNN
Address	USF SCHOOL OF DANCE PO BOX 27086
City-State-Zip:	TAMPA FL 33623