

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000003191

Entity Name: DOMINION SANCTUARY OF TAMPA BAY INC**Current Principal Place of Business:**15929 N. FLORIDA AVE
LUTZ, FL 33549**Current Mailing Address:**15929 N. FLORIDA AVE
LUTZ, FL 33549 US**FEI Number: 82-4908941****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HANNA LEMAR & MORRIS CPAS PA
6508 E FOWLER AVENUE
TAMPA, FL 33617 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	S
Name	TURKSON, VANESSA
Address	17104 CARRINGTON PARK DRIVE
City-State-Zip:	TAMPA FL 33647

Title	T
Name	TURKSON, RITA
Address	17104 CARRINGTON PARK DRIVE
City-State-Zip:	TAMPA FL 33647

Title	P
Name	TOM-WRIGHT, TITIDLA
Address	8109 WATER TOWER DRIVE
City-State-Zip:	TAMPA FL 33619

Title	VP
Name	TOM-WRIGHT, TOLULOPE
Address	8109 WATER TOWER DRIVE
City-State-Zip:	TAMPA FL 33619

Title	CEO
Name	WRIGHT, ANNE T PASTOR
Address	8109 WATER TOWER DRIVE
City-State-Zip:	TAMPA FL 33619

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: RITA TURKSON**TREASUER****03/08/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date