

**2024 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N21000008876

**Entity Name:** SOARING CITY !P, INC.

**Current Principal Place of Business:**

2138 UNIVERSITY SQUARE MALL  
TAMPA, FL 33612

**Current Mailing Address:**

PO BOX 82497  
TAMPA, FL 33682 US

**FEI Number:** 87-1877343

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

LARSON, ERIC  
2515 W NORTH ST  
TAMPA, FL 33614 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:** ERIC LARSON

07/29/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BERGHERM, BRUCE  
Address 14055 RIVEREDGE DRIVE, SUITE 250  
City-State-Zip: TAMPA FL 33637

Title DIRECTOR  
Name BRIDOFF, RICK  
Address 810 SEVENTH AVE.  
10TH FLOOR  
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR  
Name BOWEN, CHRISTOPHER  
Address 12342 UNIVERSITY SQUARE MALL  
City-State-Zip: TAMPA FL 33612

Title DIRECTOR  
Name DUNNING, DAVID  
Address 13000 BRUCE B. DOWNS BLVD.  
City-State-Zip: TAMPA FL 33612

Title COO, MANAGER  
Name LARSON, ERIC  
Address PO BOX 82497  
City-State-Zip: TAMPA FL 33682

*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:** SOARING CITY IP INC ERIC LARSON

COO

07/29/2024

Electronic Signature of Signing Officer/Director Detail

Date