

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

DOCUMENT# N22000007278

**Entity Name:** DOG MOMS OF TAMPA BAY, INC.

**Current Principal Place of Business:**

3816 WEST IOWA AVE  
TAMPA, FL 33616

**Current Mailing Address:**

7735 DEER FOOT DRIVE  
NEW PORT RICHEY, FL 34653

**FEI Number: 88-2984760**

**Certificate of Status Desired: No**

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

VOECKS, DORICE R. ESQ.  
3816 WEST IOWA AVE  
TAMPA, FL 33616 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 VP  
Name VOECKS, DORICE  
Address 3816 WEST IOWA AVE  
City-State-Zip: TAMPA FL 33616

Title VP  
Name LEE, ZOE Q  
Address 7735 DEER FOOT DRIVE  
City-State-Zip: NEW PORT RICHEY FL 34653

Title VP  
Name MILLER, ASHLEY A  
Address 966 DOUGLAS AVE. APT. 321  
City-State-Zip: DUNEDIN FL 34698

Title VP  
Name GILL, SARAH K  
Address 4307 WEST NORTH A STREET, APT. I  
City-State-Zip: TAMPA FL 33609

Title VP  
Name HECKNER, JENNIFER M  
Address 4734 67TH AVENUE NORTH  
City-State-Zip: PINELLAS PARK FL 33781

*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: DORICE R. VOECKS**

**VP**

**02/26/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date