

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26794

Entity Name: OLD SEMINOLE HEIGHTS NEIGHBORHOOD ASSOCIATION, INC.**FILED**
Jan 23, 2015
Secretary of State
CC2508717572**Current Principal Place of Business:**5806 NORTH BRANCH AVENUE
TAMPA, FL 33604**Current Mailing Address:**P.O. BOX 360022
TAMPA, FL 33673**FEI Number: 59-3359933****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**HUNTER, WILLIAM R
5806 NORTH BRANCH AVENUE
TAMPA, FL 33604 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	PRESIDENT
Name	JOHNSON, DEBI
Address	504 EAST FRIERSON AVENUE
City-State-Zip:	TAMPA FL 33603-2224
Title	TREASURER
Name	ST. IVES, ANTHONY
Address	1227 EAST POWHATAN AVENUE
City-State-Zip:	TAMPA FL 33604-7231
Title	VP
Name	BINGHAM, SUSAN S
Address	1223 EAST HANNA AVENUE
City-State-Zip:	TAMPA FL 33604-6819
Title	TRUSTEE
Name	HANSEN, DAVID
Address	5303 NORTH BRANCH AVENUE
City-State-Zip:	TAMPA FL 33603

Title	SECRETARY
Name	HUNTER, WILLIAM R
Address	5806 NORTH BRANCH AVENUE
City-State-Zip:	TAMPA FL 33604
Title	TRUSTEE
Name	MCNAMEE, MARTHA
Address	1210 EAST CLIFTON STREET
City-State-Zip:	TAMPA FL 33604
Title	TRUSTEE
Name	RANCK, RICH
Address	116 WEST COMANCHE AVENUE
City-State-Zip:	TAMPA FL 33603
Title	TRUSTEE
Name	HANEY, MARK
Address	1007 EAST CRENSHAW
City-State-Zip:	TAMPA FL 33604

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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: ANTHONY EVAN ST. IVES**TREASURER****01/23/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	TRUSTEE
Name	ALLEN, LORI
Address	3815 NORTH NEBRASKA AVENUE
City-State-Zip:	TAMPA FL 33603