2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29811

Entity Name: TAMPA BAY COIN CLUB, INC.

Current Principal Place of Business:

15550 SPRING PINE DR TAMPA FL 33624

Current Mailing Address:

P.O. BOX 46534

TAMPA FL 33646 US

FEI Number: 59-2953351 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TROTTIER, TRACY G 23504 BELLAIRE LOOP LAND O LAKES, FL 34639 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: TRACY G TROTTIER 02/05/2021

Electronic Signature of Registered Agent

Date

FILED Feb 05, 2021

Secretary of State

4171201602CC

Officer/Director Detail:

City-State-Zip:

Title PRESIDENT Title 1ST VP

 Name
 TERCYAK, STEVE
 Name
 MISIAK, DENNIS

 Address
 235 W BRANDON BLVD SUITE #170
 Address
 P.O. BOX 46534

 City-State-Zip:
 TAMPA FL 33646

City-State-Zip: BRANDON FL 33511

TAMPA FL 33646

Title 2ND VP Title SECRETARY

Name SCHEMITSCH,, RICHARD

Address P.O. BOX 46534 Address 16013 MARSHFIELD DR
City-State-Zip: TAMPA FL 33624

City-State-Zip: TAMPA
City-State-Zip: TAMPA

Title TREASURER Title ASST. SECRETARY

Name TIFFANY, RICHARD

Name TROTTIER, TRACY

Address 23504 BELLAIRE LOOP

City-State-Zip: TAMPA FL 33646
City-State-Zip: LAND O LAKES FL 34639

Title DIRECTOR

 Title
 DIRECTOR
 Name
 TAGGART, INGE

 Name
 OMEARA, ALBERT
 Address
 P.O. BOX 46534

 Address
 P.O. BOX 46534
 ON ACCURATE TO ADDRESS TO ADDRES

City-State-Zip: TAMPA FL 33646

Continues on page 2

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: TRACY G TROTTIER TREASURER 02/05/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

TitleDIRECTORTitleDIRECTORNameLEBEDA, ALANNameMEHL, KURTAddressP.O. BOX 46534AddressP.O. BOX 46534City-State-Zip:TAMPA FL 33646City-State-Zip:TAMPA FL 33646

Title DIRECTOR Title DIRECTOR

 Name
 LYDIC, ANDREW
 Name
 CRESPO, JOSEPH

 Address
 5224 NET DRIVE APT #219
 Address
 P.O. BOX 46534

City-State-Zip: TAMPA FL 33646

Title DIRECTOR

 Name
 ARCAS, RICHARD

 Name
 TAGGART, HUGH

 Address
 P.O. BOX 46534

City-State-Zip: TAMPA FL 33646