

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N32543

Entity Name: FLORIDA HOLOCAUST MUSEUM, INC.

Current Principal Place of Business:

55 5TH STREET SOUTH
SAINT PETERSBURG, FL 33701

Current Mailing Address:

55 5TH STREET SOUTH
SAINT PETERSBURG, FL 33701

FEI Number: 59-2981494

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

1SOURCE PARTNERS
701 S HOWARD AVE, SUITE 203
TAMPA, FL 33606 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: TANYA PAVLIK

10/02/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name BAND, ALEXANDRA K
Address RAYMOND JAMES FINANCIAL, INC.
880 CARRILLON PARKWAY
City-State-Zip: ST. PETERSBURG FL 33716

Title VICE CHAIR OPERATIONS
Name BOMSTEIN, JOSHUA
Address 620 DREW STREET
City-State-Zip: CLEARWATER FL 33755

Title BOARD CHAIR
Name IGEL, MICHAEL A.
Address JOHNSON POPE
333 3RD AVENUE N. SUITE 200
City-State-Zip: ST. PETERSBURG FL 33701

Title TREASURER
Name ALVAREZ, DAVID
Address 3120 W WALLCRAFT AVENUE
City-State-Zip: TAMPA FL 33611

Title VICE CHAIR DEVELOPMENT
Name WORTHINGTON, RACHAEL S
Address 35 WATERGATE DR #1402
City-State-Zip: SARASOTA FL 34236

Title VICE CHAIR GOVERNANCE
Name CONROY, STACY
Address 55 5TH STREET SOUTH
City-State-Zip: SAINT PETERSBURG FL 33701

Title PRESIDENT
Name GOODMAN, CARL
Address 55 5TH STREET SOUTH
City-State-Zip: SAINT PETERSBURG FL 33701

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: CARL GOODMAN

PRESIDENT

10/02/2023

Electronic Signature of Signing Officer/Director Detail

Date