

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38403

FILED
Jan 23, 2017
Secretary of State
CC2715652384

Entity Name: UNIVERSITY OF SOUTH FLORIDA AREA COMMUNITY CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

14013 N. 22ND ST
STE B
TAMPA, FL 33613

Current Mailing Address:

PO BOX 47058
TAMPA, FL 33646

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMBS, SARAH
14013 N. 22ND ST
STE B
TAMPA, FL 33613 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: SARAH COMBS

01/23/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name CRIST, VICTOR D.
Address P O BOX 47058
City-State-Zip: TAMPA FL 33646

Title VPD
Name GRANTHAM, DON
Address 2121 E. 131 AVE
City-State-Zip: TAMPA FL 33613

Title VPD
Name WELLS, PAUL
Address 3111 FLAT ROCK PLACE
City-State-Zip: LAND O LAKES FL 34639

Title TD
Name SANDERSON, JIM
Address 12307 N 52ND ST
City-State-Zip: TAMPA FL 33617

Title SD
Name EASTON, JO
Address 409 HAYES RD
City-State-Zip: LUTZ FL 33549

Title CEO-UACDC
Name COMBS, SARAH
Address 14013 N. 22ND ST
STE B
City-State-Zip: TAMPA FL 33613

Title CFO-UACDC
Name ZIMPRICH, ROB
Address 14013 N. 22ND ST
STE B
City-State-Zip: TAMPA FL 33613

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: ROBERT ZIMPRICH

CFO

01/23/2017

Electronic Signature of Signing Officer/Director Detail

Date