

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46596

Entity Name: TAMPA BAY BPW FOUNDATION, INC.**Current Principal Place of Business:**401 E. JACKSON
SUITE 2425
TAMPA, FL 33602**Current Mailing Address:**P O BOX 320925
TAMPA, FL 33679 US**FEI Number:** 59-3146899**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JACOBS, LORIBEL
401 E. JACKSON
SUITE 2425
TAMPA, FL 33602 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:** LORIBEL JACOBS**02/01/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP, DIRECTOR
Name STRAIT, DOLORES
Address 401 N. PARSONS AVE
#106B
City-State-Zip: BRANDON FL 33510

Title DIRECTOR
Name MERTES, KAREN
Address 3030 N ROCKY POINT DR W
#150
City-State-Zip: TAMPA FL 33607

Title SECRETARY, DIRECTOR
Name BROWN, HEATHER
Address 401 E JACKSON STREET
SUITE 2425
City-State-Zip: TAMPA FL 33602

Title PRESIDENT, DIRECTOR
Name MAXIE, CINDY
Address 3635 COLD CREEK DRIVE
City-State-Zip: VALRICO FL 33596

Title DIRECTOR
Name PETERS, CELIA
Address 4301 HARBOR HOUSE DR.
City-State-Zip: TAMPA FL 33615

Title TREASURER, DIRECTOR
Name JACOBS, LORIBEL
Address 401 E. JACKSON
SUITE 2425
City-State-Zip: TAMPA FL 33602

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: LORIBEL JACOBS**TREASURER****02/01/2018**

Electronic Signature of Signing Officer/Director Detail

Date