

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46647

Entity Name: VISITOR INDUSTRY HUMAN RESOURCE DEVELOPMENT
COUNCIL, INC.**FILED**
Apr 23, 2018
Secretary of State
CC5296427193**Current Principal Place of Business:**701 BRICKELL AVE
SUITE 2700
MIAMI, FL 33131**Current Mailing Address:**701 BRICKELL AVE
SUITE 2700
MIAMI, FL 33131**FEI Number: 65-0329273****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**WEST, ALVIN L
701 BRICKELL AVE
SUITE 2700
MIAMI, FL 33131 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	CHAIRMAN
Name	TAYLOR, CAROLE ANN
Address	701 BRICKELL AVENUE SUITE 2700
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	TALBERT, WILLIAM DIII
Address	701 BRICKELL AVENUE SUITE 2700
City-State-Zip:	MIAMI FL 33131

Title	SECRETARY
Name	WASHINGTON, SANDRA M
Address	701 BRICKELL AVENUE SUITE 2700
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	WEST, ALVIN
Address	701 BRICKELL AVENUE SUITE 2700
City-State-Zip:	MIAMI FL 33131

Title	TREASURER
Name	FIELDS, ANN
Address	701 BRICKELL AVE SUITE 2700
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	BOONE, RETHA
Address	701 BRICKELL AVE SUITE 2700
City-State-Zip:	MIAMI FL 33131

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: WILLIAM D. TALBERT, III**DIRECTOR****04/23/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date