## **2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000000535

Entity Name: FLORIDA TROPICAL FISH FARMS TRADE ASSOCIATION, INC.

FILED
Jan 29, 2021
Secretary of State
4130502722CC

**Current Principal Place of Business:** 

141 AVE A, SE

WINTER HAVEN, FL 33880

**Current Mailing Address:** 

P.O. BOX 1519

WINTER HAVEN. FL 33882

FEI Number: 59-3157238 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOOZER, DAVID 141 AVE A, SE

WINTER HAVEN, FL 33880 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 D, SECRETARY Title PRESIDENT

Name HOLLON, BRITTANY Name LEPOCHAT, PIERRE

Address 6209 ROBBINS RD Address PO BOX 1827

City-State-Zip: LAKELAND FL 33810 City-State-Zip: SEFFNER FL 33583

Title D, TREASURER Title D, VP

NameDRAWDY, DUSTINNameDE ZWART, ARIEAddress1507 WILLIAMS RDAddressP O BOX 972087City-State-Zip:PLANT CITY FL 33565City-State-Zip: MIAMI FL 33116

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Title D Title DIRECTOR

NameDAVID, GARRYNameMIKE, DRAWDYAddress8956 N DEES RDAddress2720 GRIMES ROAD

City-State-Zip: LAKELAND FL 33809 City-State-Zip: LAKELAND FL 33805

Title DIRECTOR

Name SKIDMORE, JOHN

Address 20112 HOBBS ROAD
City-State-Zip: WIMAUMA FL 33598

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: PIERRE LEPOCHAT PRESIDENT 01/29/2021