

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005016

Entity Name: FUNERAL CONSUMERS ASSOCIATION OF TAMPA BAY INC.

Current Principal Place of Business:

C/O M. SANDRA ELMORE
18902 ARBOR DR
LUTZ, FL 33548-5051

Current Mailing Address:

C/O M. SANDRA ELMORE
18902 ARBOR DR
LUTZ, FL 33548-5051 US

FEI Number: 59-3213555

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELMORE, M S
18902 ARBOR DR
LUTZ, FL 33548-5051 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 P
Name CONDON, JAMES K
Address 7645 WIMPOLE DR.
City-State-Zip: NEW PORT RICHEY FL 34655-4815

Title VP
Name ALEXANDER, MARSHELLE
Address 8747 ASHWORTH DR.
City-State-Zip: TAMPA FL 33647

Title SD
Name UFFNER, DANIEL JR.
Address 816 MCCALLISTER AVE
City-State-Zip: SUN CITY CENTER FL 33573

Title TD
Name ELMORE, M S
Address 18902 ARBOR DR
City-State-Zip: LUTZ FL 33548-5051

Title D
Name OWENS, NAN
Address 4704 LAKEWOOD DR
City-State-Zip: SEFFNER FL 33684

Title DIRECTOR
Name ADAMS, PETER
Address 3616 HARDEN BLVD. # 325
City-State-Zip: LAKELAND FL 33803

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: M. SANDRA ELMORE

TREASURER

02/12/2014

Electronic Signature of Signing Officer/Director Detail

Date