

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

DOCUMENT# N94000006117

**Entity Name:** THOMAS A. AND MARY S. JAMES FOUNDATION, INC.**Current Principal Place of Business:**880 CARILLON PARKWAY  
SAINT PETERSBURG, FL 33716**Current Mailing Address:**880 CARILLON PARKWAY  
SAINT PETERSBURG, FL 33716**FEI Number:** 59-3288143**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JAMES, THOMAS A  
880 CARILLON PARKWAY  
ST. PETERSBURG, FL 33716 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	PTT
Name	JAMES, THOMAS A
Address	880 CARILLON PARKWAY
City-State-Zip:	ST. PETERSBURG FL
Title	T
Name	JAMES, COURTLAND W.
Address	1858 BRIGHTWATERS BLVD. NE
City-State-Zip:	SAINT PETERSBURG FL 33704

Title	ST
Name	JAMES, MARY S
Address	9341 SILVERTHORN RD
City-State-Zip:	LARGO FL 33777
Title	T
Name	JAMES, HUNTINGTON A
Address	4609 W. SYLVAN RAMBLE
City-State-Zip:	TAMPA FL 33609

*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:** THOMAS A JAMES**AGENT****01/07/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date