### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003717

Entity Name: TRANSPORTATION AND EXPRESSWAY AUTHORITY

MEMBERSHIP OF FLORIDA (TEAMFL), INC.

### **Current Principal Place of Business:**

2121 CAMDEN ROAD

SUITE B

ORLANDO, FL 32803

## **Current Mailing Address:**

2121 CAMDEN ROAD SUITE B ORLANDO, FL 32803 US

FEI Number: 59-3461164 Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

HARTNETT, ROBERT C 2121 CAMDEN ROAD SUITE B ORLANDO, FL 32803 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title **PCEO** 

HARTNETT, ROBERT C Name FULLER, VAN Name Address 4400 E. HWY 20, SUITE 403 Address 2121 CAMDEN RD SUITE B

City-State-Zip: NICEVILLE FL 32578 City-State-Zip: ORLANDO FL 32803

Title S Title **CHAIRMAN** 

MERCER, ATLEE Name VANDERPOL, JACKIE Name 3236 NO. ORANGE AVE. Address Address ONE COURTHOUSE SQUARE

**SUITE 4700** City-State-Zip:

City-State-Zip: KISSIMMEE FL 34741

DIRECTOR Title VC Title

Name RICH, A. WAYNE Name STOKES, CURTIS

Address 390 NORTH ORANGE AVENUE 1104 EAST TWIGGS STREET, SUITE Address **SUITE 1400** 

100

City-State-Zip: ORLANDO FL 32801 City-State-Zip: **TAMPA FL 33602** 

Title DIRECTOR Title DIRECTOR Name ELY. JIM

BAUMAN, MIKE Name Address 501 E. TENNESSEE ST., SUITE C

2601 BRICKELL AVENUE Address

City-State-Zip: TALLAHASSEE FL 32308 MIAMI FL 33129 City-State-Zip:

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ORLANDO FL 32803

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.

01/05/2015 SIGNATURE: ROBERT HARTNETT PRESIDENT/CEO

**FILED** Jan 05, 2015

Secretary of State

CC8258288213

# Officer/Director Detail Continued:

Title TREASURER Title

Name FORD, NATHANIEL SR. Name PENDERGRASS, CECIL

DIRECTOR

Address 100 NORTH MYRTLE AVENUE Address PO BOX 398

City-State-Zip: JACKSONVILLE FL 32205 City-State-Zip: FORT MYERS FL 33902

Title DIRECTOR Title DIRECTOR

NameSCACCETTI, DIANENameRODRIGUEZ PINA, RICKAddressPO BOX 313069Address2506 LUDLAM ROAD

City-State-Zip: OCOEE FL 34761 City-State-Zip: MIAMI FL 33155

Title DIRECTOR Title DIRECTOR

Name HOWSE, RONALD Name CADWELL, WELTON

Address 605 SUWANNEE STREET, MAIL STATION 9 Address PO BOX 7800 315 W. MAIN STREET

City-State-Zip: TALLAHASSEE FL 32399 City-State-Zip: TAVARES FL 32788

T'II DIDECTOR

Title DIRECTOR

Name HOLTZMAN, SONNY

Address 2121 PONCE DE LEON BLVD. SUITE 1280

City-State-Zip: CORAL GABLES FL 33134