2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007140

Entity Name: TAMPA BAY COMMUNITY ASSOCIATION, INC.

FILED Apr 17, 2023 Secretary of State 3378273464CC

Current Principal Place of Business:

C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N STE 100 SAINT PETERSBURG, FL 33716

Current Mailing Address:

C/O FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N STE 100 SAINT PETERSBURG, FL 33716 US

FEI Number: 59-3701646 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

APPLETON, ERIC 215 N HOWARD AVE SUITE 200 TAMPA, FL 33606 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: ERIC APPLETON 04/17/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title VP

Name RUSSELL, NANCY Name GLOSS, SR, MICHAEL

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N STE 100 2870 SCHERER DR N STE 100

City-State-Zip: SAINT PETERSBURG FL 33716 City-State-Zip: SAINT PETERSBURG FL 33716

Title TREASURER Title SECRETARY

Name STERNAL, SANDRA Name MYSZKA, ROBERT

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N STE 100 2870 SCHERER DR N STE 100

City-State-Zip: SAINT PETERSBURG FL 33716 City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR Title DIRECTOR

Name SAHAGIAN, ARMEN Name PHILLIPS, RICHARD W

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIEDNTIAL

2870 SCHERER DRIVE N SUITE 100 2870 SCHERER DRIVE N SUITE 100

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR Title DIRECTOR

Name LEEK, CYNTHIA Name KEATING, JAMES

Address C/O FIRSTSERVICE RESIEDNTIAL Address C/O FIRSTSERVICE RESIEDNTIAL

2870 SCHERER DRIVE N SUITE 100

City-State-Zip: ST. PETERSBURG FL 33716 City-State-Zip: ST. PETERSBURG FL 33716

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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: NANCY RUSSELL PRESIDENT 04/17/2023

2870 SCHERER DRIVE N SUITE 100

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name BURCHILL, DUDLEY Name HASKINS, GEORGE

Address C/O FIRSTSERVICE RESIDENTIAL Address C/O FIRSTSERVICE RESIDENTIAL

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