

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007140

FILED
Feb 20, 2017
Secretary of State
CC1222698822

Entity Name: TAMPA BAY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

9887 FOURTH STREET NORTH
SUITE 301
SAINT PETERSBURG, FL 33702

Current Mailing Address:

9887 FOURTH STREET NORTH
SUITE 301
SAINT PETERSBURG, FL 33702 US

FEI Number: 59-3701646

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASSOCIA GULF COAST, INC
9887 FOURTH STREET NORTH
SUITE 301
SAINT PETERSBURG, FL 33702 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: DENNIS MANSFIELD

02/20/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name FARLEY, GARY
Address 9887 FOURTH STREET NORTH
 SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title VP
Name MOSHIER, MICHAEL
Address 9887 FOURTH STREET NORTH
 SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title TREASURER
Name HARTUNG, DAVID
Address 9887 FOURTH STREET NORTH
 SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title SECRETARY
Name MCCOWN, KENNETH
Address 9887 FOURTH STREET NORTH
 SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name PLANK, WILLIAM
Address 9887 FOURTH STREET NORTH
 SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name GABBARD, MARSHA
Address 9887 FOURTH STREET NORTH
 SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name SMITH, ROBERT
Address 9887 FOURTH STREET NORTH
 SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name CANDIA, DAVID
Address 9887 FOURTH STREET NORTH
 SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

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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: GARY FARLEY

PRESIDENT

02/20/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PORTER, KAREN
Address 9887 FOURTH STREET NORTH
SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702

Title DIRECTOR
Name NOEL, GEORGE
Address 9887 FOURTH STREET NORTH
SUITE 301
City-State-Zip: SAINT PETERSBURG FL 33702