## 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000013164

Entity Name: ROCHE FAMILY HOLDINGS, INC.

**Current Principal Place of Business:** 

4107 NORTH HIMES AVENUE - 2ND FLOOR TAMPA. FL 33607

**Current Mailing Address:** 

4107 NORTH HIMES AVENUE - 2ND FLOOR

**TAMPA. FL 33607** 

FEI Number: 27-0512147 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MARTIN, MELISA M 4107 NORTH HIMES AVENUE - 2ND FLOOR TAMPA, FL 33607 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 Title VP

Name ROCHE, ARMANDO O Name ROCHE, LINDA

Address 4107 NORTH HIMES AVENUE Address 4107 NORTH HIMES AVENUE

2ND FLOOR 2ND FLOOR

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title VP Title S

Name ROCHE, SHANNON Name MARTIN, MELISA M

Address 4107 NORTH HIMES AVENUE Address 4107 NORTH HIMES AVENUE

2ND FLOOR 2ND FLOOR

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

TitleDIRECTORTitleDIRECTORNameHARVEY, BLAIRNameROCHE, SHANE

Address 4107 NORTH HIMES AVENUE Address 4107 NORTH HIMES AVENUE - 2ND

2ND FLOOR FLOOR

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title DIRECTOR
Name PEREZ, BATINA

Address 4107 NORTH HIMES AVENUE - 2ND

**FLOOR** 

City-State-Zip: TAMPA FL 33607

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MELISA MARTIN S 01/04/2024

FILED Jan 04, 2024

**Secretary of State** 

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