

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P14000084561

**Entity Name:** TGHHOC, INC.

**Current Principal Place of Business:**

ONE TAMPA GENERAL CIRCLE  
TAMPA, FL 33606

**Current Mailing Address:**

PO BOX 1289  
TAMPA, FL 33601-1289 US

**FEI Number:** 47-2089251

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CF REGISTERED AGENT, INC.  
100 S. ASHLEY DRIVE  
SUITE 400  
TAMPA, FL 33602 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           DIRECTOR  
Name           EAGAN, CHERYL  
Address        ONE TAMPA GENERAL CIRCLE  
City-State-Zip: TAMPA FL 33606

Title           DIRECTOR  
Name           ARNOLD, SCOTT  
Address        ONE TAMPA GENERAL CIRCLE  
City-State-Zip: TAMPA FL 33606

Title           DIRECTOR  
Name           CAMPBELL, MARK  
Address        ONE TAMPA GENERAL CIRCLE  
City-State-Zip: TAMPA FL 33606

*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:** SCOTT ARNOLD

**DIRECTOR**

**06/29/2020**

Electronic Signature of Signing Officer/Director Detail

Date