

2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000002068

Entity Name: INTERNATIONAL HOMICIDE INVESTIGATORS ASSOCIATION, INC.**FILED**
Feb 03, 2022
Secretary of State
2442786076CC**Current Principal Place of Business:**14910 DALE MABRY HIGHWAY NORTH
BOX 340529
TAMPA, FL 33694**Current Mailing Address:**PO BOX 340529
TAMPA, FL 33694 US**FEI Number: 42-1322075****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MARINO, PAUL J ESQ
13300 INDIAN ROCKS ROAD #1404
LARGO, FL 33774 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	D
Name	CORRADO, MICHAEL
Address	14910 DALE MABRY HIGHWAY NORTH BOX 340529
City-State-Zip:	TAMPA FL 33694

Title	ASSOCIATION MANAGER
Name	LEWIS, STEVE
Address	14910 DALE MABRY HIGHWAY NORTH BOX 340529
City-State-Zip:	TAMPA FL 33694

Title	PAST PRESIDENT
Name	ESTEBAN, GREGORY M
Address	14910 DALE MABRY HIGHWAY NORTH BOX 340529
City-State-Zip:	TAMPA FL 33694

Title	D
Name	BLAIR, R.MICHAEL
Address	14910 DALE MABRY HIGHWAY NORTH BOX 340529
City-State-Zip:	TAMPA FL 33694

Title	PRESIDENT
Name	BELLI, PAUL
Address	14910 DALE MABRY HIGHWAY NORTH BOX 340529
City-State-Zip:	TAMPA FL 33694

Title	DIRECTOR
Name	BURAS, STEPHEN V
Address	14910 DALE MABRY HIGHWAY NORTH BOX 340529
City-State-Zip:	TAMPA FL 33694

Title	VP
Name	PETERS, ROBERT
Address	14910 DALE MABRY HIGHWAY NORTH BOX 340529
City-State-Zip:	TAMPA FL 33694

Title	DIRECTOR
Name	PERREAULT, RICHARD
Address	14910 DALE MABRY HIGHWAY NORTH BOX 340529
City-State-Zip:	TAMPA FL 33694

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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: STEVEN LEWIS**ASSOCIATION MANAGER 02/03/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name EDDY, DAVID
Address 14910 DALE MABRY HIGHWAY NORTH
BOX 340529
City-State-Zip: TAMPA FL 33694

Title DIRECTOR
Name DAVID, GAYLOR
Address 14910 DALE MABRY HIGHWAY NORTH
BOX 340529
City-State-Zip: TAMPA FL 33694

Title SECRETARY
Name GRAHAM, NATHAN
Address 14910 DALE MABRY HIGHWAY NORTH
BOX 340529
City-State-Zip: TAMPA FL 33694

Title DIRECTOR
Name KRAMER, JODY
Address 14910 DALE MABRY HIGHWAY NORTH
BOX 340529
City-State-Zip: TAMPA FL 33694

Title DIRECTOR
Name FRANCIS, LOSAT
Address 14910 DALE MABRY HIGHWAY NORTH
BOX 340529
City-State-Zip: TAMPA FL 33694

Title DIRECTOR
Name AMON-WILKINS, RIO
Address 14910 DALE MABRY HIGHWAY NORTH
BOX 340529
City-State-Zip: TAMPA FL 33694

Title DIRECTOR
Name MCCLAIN, JEFF
Address 14910 DALE MABRY HIGHWAY NORTH
BOX 340529
City-State-Zip: TAMPA FL 33694