## 2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004238

**Entity Name: TAMPA FOOTBALL CORPORATION** 

**Current Principal Place of Business:** 

ONE BUCCANEER PLACE TAMPA FL 33607

**Current Mailing Address:** 

ONE BUCCANEER PLACE TAMPA FL 33607 US

FEI Number: 59-3339562 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FORD, BRIAN ONE BUCCANEER PLACE 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: BRIAN FORD 04/24/2024

> Date Electronic Signature of Registered Agent

**FILED** Apr 24, 2024

**Secretary of State** 

9677011940CC

Date

Officer/Director Detail:

Title CHAIRMAN, PRESIDENT Title DIRECTOR, VP, SECRETARY

GLAZER, LINDA GLAZER, JOEL Name Name

ONE BUCCANEER PLACE ONE BUCCANEER PLACE Address Address

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

Title VP, ASSISTANT SECRETARY Title DIRECTOR, VP, ASSISTANT

SECRETARY Name GLAZER, AVRAM

Name GLAZER, BRYAN Address

ONE BUCCANEER PLACE ONE BUCCANEER PLACE Address TAMPA FL 33607 City-State-Zip:

City-State-Zip: TAMPA FL 33607

Title VP, ASSISTANT SECRETARY Title VP, ASSISTANT SECRETARY

Name GLAZER, EDWARD Name GLAZER, KEVIN

Address ONE BUCCANEER PLACE Address ONE BUCCANEER PLACE

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

Title VP. ASSISTANT SECRETARY Name GLAZER KASSEWITZ, DARCIE

Address ONE BUCCANEER PLACE

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.

04/24/2024 SIGNATURE: JOEL GLAZER DIRECTOR, VP. SECRETARY

Electronic Signature of Signing Officer/Director Detail