

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 704319**

1. Entity Name

NORTH TAMPA CHAMBER OF COMMERCE, INC.**FILED**
Mar 04, 2002 8:00 am
Secretary of State

03-04-2002 90006 040 ****61.25

00000002

Principal Place of Business Mailing Address
3333 EAST BUSCH BOULEVARD 3333 EAST BUSCH BOULEVARD
TAMPA FL 33612 TAMPA FL 33612

2. Principal Place of Business 3. Mailing Address
3333 East Busch Blvd. 3333 East Busch Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Tampa, Fla.

Tampa, Fla.

Zip 33612

Country Hills.

Zip 33612

Country Hills.

4. FEI Number

59-0973498

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIEGEL, LAWRENCE
3333 EAST BUSCH BLVD.
TAMPA FL 33612

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
NAME FLOWERS, CYNTHIA
STREET ADDRESS 5321 GUNN HWY
CITY-ST-ZIP TAMPA FL 33624

TITLE D ☐ Delete
NAME FUTCH, CHARLES
STREET ADDRESS 3333 EAST BUSH BLVD.
CITY-ST-ZIP TAMPA FL

TITLE PD ☒ Delete
NAME FERNANDEZ, STEPHANIE
STREET ADDRESS 10013 N. FLORIDA AVE
CITY-ST-ZIP TAMPA FL 33612

TITLE D ☒ Delete
NAME RIGGS, TONI
STREET ADDRESS 3333 EAST BUSH BLVD.
CITY-ST-ZIP TAMPA FL

TITLE ☒ Delete
NAME DAVIES, JERRY
STREET ADDRESS PO BOX 270632
CITY-ST-ZIP TAMPA FL 33688

TITLE ☒ Delete
NAME MADOCK, DAN
STREET ADDRESS 326 WEST BEARSS AVE #A
CITY-ST-ZIP TAMPA FL 33613

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE S ☐ Change ☒ Addition
NAME Scott Selvaggi
STREET ADDRESS 3705 Spectrum Blvd.
CITY-ST-ZIP Tampa, FL 33612

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Kim Estrada, Tampa, Fla. 33612
STREET ADDRESS 3650 Spectrum Blvd. Suite 100
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Betty Reed
STREET ADDRESS 2410 East Busch Blvd.
CITY-ST-ZIP Tampa, Fla. 33612

TITLE T ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE P ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes; I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JERRY DAVIES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-02

Date

813-269-2091

Daytime Phone #

CR2E037 (9/01)