

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716919

Entity Name: THE TAMPA JCC/FEDERATION, INC.**Current Principal Place of Business:**13009 COMMUNITY CAMPUS DRIVE
TAMPA, FL 33625**Current Mailing Address:**13009 COMMUNITY CAMPUS DRIVE
TAMPA, FL 33625 US**FEI Number:** 23-7182057**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BENJAMIN, SALLY CFAO
13009 COMMUNITY CAMPUS DR
TAMPA, FL 33625 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	VP
Name	TAUB, DEBBIE
Address	13009 COMMUNITY CAMPUS DR
City-State-Zip:	TAMPA FL 33625

Title	PRESIDENT
Name	PROBASCO, JOSEPH
Address	13009 COMMUNITY CAMPUS DRIVE
City-State-Zip:	TAMPA FL 33625

Title	VP
Name	SCHOENBAUM, SUSAN
Address	13009 COMMUNITY CAMPUS DR
City-State-Zip:	TAMPA FL 33625

Title	SECRETARY/TREASURER
Name	SILBERMAN, AARON
Address	13009 COMMUNITY CAMPUS DRIVE
City-State-Zip:	TAMPA FL 33625

Title	IMMEDIATE PAST PRESIDENT
Name	WALK, ROCHELLE
Address	13009 COMMUNITY CAMPUS DRIVE
City-State-Zip:	TAMPA FL 33625

Title	VP
Name	JAFFE, LAUREEN
Address	13009 COMMUNITY CAMPUS DRIVE
City-State-Zip:	TAMPA FL 33625

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: JOSEPH PROBASCO**PRESIDENT****02/15/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date