

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 718784

Entity Name: BOLEY CENTERS, INC.**Current Principal Place of Business:**445 31ST STREET NORTH
SAINT PETERSBURG, FL 33713**Current Mailing Address:**445 31ST STREET NORTH
SAINT PETERSBURG, FL 33713**FEI Number:** 59-1290089**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MACMATH, GARY
445 31ST STREET NORTH
SAINT PETERSBURG, FL 33713 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 PRESIDENT/CEO
Name MACMATH, GARY
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title DIRECTOR
Name INCORVIA, SANDRA
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title DIRECTOR
Name LOTT, MARTIN
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title DIRECTOR
Name HEBERT, JOHN T
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title COO, CORPORATE SECRETARY
Name MARRONE, KEVIN
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title SECOND VICE CHAIRMAN
Name MISIEWICZ, PAUL
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title DIRECTOR
Name POYNTER, SALLY
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title FIRST VICE CHAIRMAN
Name BUSSEY, RUTLAND
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

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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: GARY MACMATH

PRESIDENT/CEO

01/24/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name STRINGER, JOSEPH
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title DIRECTOR
Name COLEY, LEONARD
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title DIRECTOR
Name HUGHES, MARKUS LIEUTENANT
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title CHAIRMAN
Name PHARES, GAIL
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title DIRECTOR
Name SMITH, JOSEPH L
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title DIRECTOR
Name DR. WALLACE, ROBERT
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title PAST CHAIRMAN
Name MCQUEEN, MAGGI
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713

Title CFO
Name RECVLOHE, NANCY
Address 445 31ST STREET NORTH
City-State-Zip: SAINT PETERSBURG FL 33713