

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 731162

**Entity Name:** THE TAMARIND, INC.

**Current Principal Place of Business:**

6665 N. OCEAN BLVD  
OCEAN RIDGE, FL 33435

**Current Mailing Address:**

6665 N. OCEAN BLVD  
OCEAN RIDGE, FL 33435

**FEI Number:** 59-1558803

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, P.A.  
625 NORTH FLAGLER DRIVE - 7TH FLOOR  
WEST PALM BEACH, FL 33401 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 PAPPAS, TODD  
Address 6665 N OCEAN BLVD  
B1  
City-State-Zip: OCEAN RIDGE FL 33435

Title DIRECTOR  
Name POMPEO, PAUL  
Address 6665 N OCEAN BLVD  
A-4  
City-State-Zip: OCEAN RIDGE FL 33435

Title T  
Name SMITH, SCOTT  
Address 6665 N OCEAN BLVD  
B5  
City-State-Zip: OCEAN RIDGE FL 33435

Title PRESIDENT  
Name GUSTAFSON, ERIK  
Address 6665 N OCEAN BLVD  
C3  
City-State-Zip: OCEAN RIDGE FL 33435

Title S  
Name MCCARTHY, MICHAEL  
Address 6665 N. OCEAN BLVD.  
City-State-Zip: OCEAN RIDGE FL 33435

*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:** TODD PAPPAS

VP

03/28/2023

Electronic Signature of Signing Officer/Director Detail

Date