

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738301

Entity Name: TAMPA CROSSROADS, INC.**Current Principal Place of Business:**5118 N. NEBRASKA AVENUE
TAMPA, FL 33603**Current Mailing Address:**5118 N. NEBRASKA AVENUE
TAMPA, FL 33603**FEI Number: 59-1743719****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROMEO, SARA
5118 N NEBRASKA AVE
TAMPA, FL 33603 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 SEC.
Name HERMAN, ANNE
Address 1201 ORIENT ROAD- HILLS.CTY.
SHERIFF OFC.
City-State-Zip: TAMPA FL 33619

Title PRES
Name ROLLIE, MATTHEW
Address 1203 E PARK CIRCLE
City-State-Zip: TAMPA FL 33604

Title EXECUTIVE DIRECTOR, CEO
Name ROMEO, SARA
Address 5118 N. NEBRASKA AVENUE
City-State-Zip: TAMPA FL 33603

Title TREA
Name CHAMBERS, CHRIS CPA
Address 13575 N 58TH STREET SU:114
City-State-Zip: CLEARWATER FL 34684

Title VP
Name HOOPER, CAROLLE
Address 4214 W WATROUS AVENUE
City-State-Zip: TAMPA FL 33629

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: MATTHEW ROLLIE**PRESIDENT****01/15/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date