

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755458

Entity Name: SUN DOME,INC.**Current Principal Place of Business:**4202 FOWLER AVE.
ATH-100
TAMPA, FL 33620**Current Mailing Address:**4202 FOWLER AVE.
ATH-100
TAMPA, FL 33620 US**FEI Number:** 59-2051855**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEKO, ASHLEY N
4202 FOWLER AVENUE, ATH100
TAMPA, FL 33620 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:** ASHLEY LEKO

02/03/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name OSCHER, STEVEN SMR
Address 201 N. FRANKLIN ST. SUITE 3150
City-State-Zip: TAMPA FL 33602

Title VP
Name HAROLD, ASTORQUIZA MR.
Address 8875 HIDDEN RIVER PARKWAY SUITE
 115
City-State-Zip: TAMPA FL 33637

Title DIRECTOR
Name LAPAN, MIKE
Address 4202 FOWLER AVE.
 ATH-100
City-State-Zip: TAMPA FL 33620

Title DIRECTOR
Name LOMBARDI, GINA
Address 4202 FOWLER AVE.
 ATH-100
City-State-Zip: TAMPA FL 33620

Title DIRECTOR
Name CLEMENTS, BARRY
Address 4202 FOWLER AVE.
 ATH-100
City-State-Zip: TAMPA FL 33620

Title DIRECTOR
Name CONDON, JENNIFER
Address 4202 EAST FOWLER AVENUE
City-State-Zip: TAMPA FL 33620

Title AUTHORIZED AGENT
Name LEKO, ASHLEY
Address 4202 FOWLER AVE.
 ATH-100
City-State-Zip: TAMPA FL 33620

Title DIRECTOR
Name GOLDSTEIN, DAVID
Address 4202 EAST FOWLER AVENUE
City-State-Zip: TAMPA FL 33620

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: LEKO, ASHLEY**AUTHORIZED AGENT**

02/03/2023

Electronic Signature of Signing Officer/Director Detail

Date