#### 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000000902

Entity Name: FOREIGN TRADE ZONE NO. 79 BOARD, INC.

FILED
Jan 15, 2021
Secretary of State
0522953704CC

#### **Current Principal Place of Business:**

PORT TAMPA BAY

1101 CHANNELSIDE DRIVE FOURTH FLOOR

TAMPA, FL 33602

### **Current Mailing Address:**

PORT TAMPA BAY 1101 CHANNELSIDE DRIVE FOURTH FLOOR TAMPA, FL 33602 US

FEI Number: 20-2228490 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

CHAMBLISS, TORREY PORT TAMPA BAY 1101 CHANNELSIDE DRIVE

1101 CHANNELSIDE DRIVE FOURTH FLOOR

TAMPA, FL 33602 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:

Address

Address

Electronic Signature of Registered Agent

Title

**SECRETARY** 

Officer/Director Detail:

Title CHAIRMAN & PRESIDENT Title VF

Name ELLIOTT, WADE Name MCMANUS, NEIL

Address PORT TAMPA BAY Address 848 8TH AVENUE SOUTH

1101 CHANNELSIDE DRIVE FOURTH

City-State-Zip: ST. PETERSBURG FL 33701

FLOOR

City-State-Zip: TAMPA FL 33602

Title TREASURER Name MARIN, JAVIER

Name ROSNER, ROB Address CENTRAL FLORIDA DEVELOPMENT

COUNCIL CITY OF TAMPA 5908 HILL

CITY OF TAMPA 5908 HILLSIDE HEIGHTS DRIVE 306 E. JACKSON STREET 2 NORTH

City-State-Zip: TAMPA FL 33602

Title DIRECTOR

Name FORISTER, RANDY

Name LAWSON, MADISON Address TAMPA INTERNATIONAL AIRPORT

TAMPA HILLSBOROUGH ECONOMIC 4100 GEORGE J. BEAN PARKWAY DEVELOPMENT CORPORATION

101 EAST KENNEDY BOULEVARD City-State-Zip: TAMPA FL 33607

City-State-Zip: TAMPA FL 33602

Title DIRECTOR

Name PETROVIC, JASKA

Address HILLSBOROUGH COUNTY ECONOMIC

DEVELOPMENT

601 E. KENNEDY BOULEVARD 13

**FLOOR** 

City-State-Zip: TAMPA FL 33602

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: WADE ELLIOTT

01/15/2021

Date

# CHAIRMAN AND PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date