

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007061

Entity Name: TAMPA HOUSING FUNDING CORPORATION**Current Principal Place of Business:**5301 W CYPRESS STREET
TAMPA, FL 33607**Current Mailing Address:**5301 W CYPRESS STREET
TAMPA, FL 33607 US**FEI Number:** 20-3350724**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GILMORE, RICARDO L ESQ
201 EAST KENNEDY BOULEVARD
SUITE 600
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:** RICARDO L. GILMORE, ESQ.

04/27/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PS
Name	RYANS, JEROME D
Address	5301 W CYPRESS STREET
City-State-Zip:	TAMPA FL 33607

Title	VP
Name	MOORE, LEROY
Address	5301 W CYPRESS STREET
City-State-Zip:	TAMPA FL 33607

Title	T
Name	BGAZO-MCGOURTY, SUSI
Address	5301 W CYPRESS STREET
City-State-Zip:	TAMPA FL 33607

Title	CHAIRMAN
Name	CLOAR, JAMES A
Address	5301 W CYPRESS STREET
City-State-Zip:	TAMPA FL 33607

Title	VC
Name	SALTER LIGGINS, BEMETRA
Address	5301 W CYPRESS STREET
City-State-Zip:	TAMPA FL 33607

Title	D
Name	DACHEPALLI, BEN
Address	5301 W CYPRESS STREET
City-State-Zip:	TAMPA FL 33607

Title	D
Name	HARDWICK, LORENA
Address	5301 W CYPRESS STREET
City-State-Zip:	TAMPA FL 33607

Title	D
Name	HOMANS, PARKER A
Address	5301 W CYPRESS STREET
City-State-Zip:	TAMPA FL 33607

Continues on page 2

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: SUSI BEGAZO-MCGOURTY**TREASURER**

04/27/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name JOHNSON-GRIFFIN, BILLI
Address 5301 W CYPRESS STREET
City-State-Zip: TAMPA FL 33607

Title DIRECTOR
Name HEMANI, SUL
Address 5301 W CYPRESS STREET
City-State-Zip: TAMPA FL 33607