

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001068

FILED
Feb 19, 2013
Secretary of State
CC1386465559

Entity Name: CITY OF TAMPA BLACK HISTORY COMMITTEE, INC.

Current Principal Place of Business:

315 EAST KENNEDY BLVD
TAMPA, FL 33602

Current Mailing Address:

POST OFFICE BOX 1782
TAMPA, FL 33601

FEI Number: 45-0540281

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUSSELL, LENOIR S
315 EAST KENNEDY BLVD
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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name CRUM, FRANK
Address 315 EAST KENNEDY BLVD
City-State-Zip: TAMPA FL 33602

Title VP
Name RUSSELL, LENOIR S
Address 315 EAST KENNEDY BLVD
City-State-Zip: TAMPA FL 33602

Title TR
Name MERCER, DEBBIE
Address 315 EAST KENNEDY BLVD
City-State-Zip: TAMPA FL 33602

Title ATRE
Name THOMPSON, WANDA
Address 315 EAST KENNEDY BLVD
City-State-Zip: TAMPA FL 33602

Title ASST. SECRETARY
Name DAVIS, DIAN
Address 315 EAST KENNEDY BLVD
City-State-Zip: TAMPA FL 33602

Title PARL
Name FORWARD, TOM
Address 315 EAST KENNEDY BLVD
City-State-Zip: TAMPA FL 33602

Title SECRETARY
Name WILLIAMS, LINDA
Address POST OFFICE BOX 1782
City-State-Zip: TAMPA FL 33601

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: DEBBIE MERCER

TREASURER

02/19/2013

Electronic Signature of Signing Officer/Director Detail

Date