

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004823

Entity Name: A SECOND WISH BY DEMETRIUS INC.**Current Principal Place of Business:**4202 E BUSCH BLVD
#5
TAMPA, FL 33614**Current Mailing Address:**PO BOX 25912
TAMPA, FL 33622 US**FEI Number:** 26-2649851**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHASEASSOCIATES, CPA, P.A.
218 E BEARSS AVE
PMB 306
TAMPA, FL 33613-1625 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:** ANTONIO CHASE

04/29/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OFFICER
Name DAVIS, VINSON
Address PO BOX 25912
City-State-Zip: TAMPA FL 33622

Title TREASURER
Name CHASE, ANTONIO
Address PO BOX 25912
City-State-Zip: TAMPA FL 33622

Title OFFICER
Name SCOTT, THOMAS
Address PO BOX 25912
City-State-Zip: TAMPA FL 33622

Title OFFICER
Name CLARKE, TIMOTHY J
Address PO BOX 25912
City-State-Zip: TAMPA FL 33622

Title DIRECTOR
Name YOUNG, LARRY
Address POST OFFICE BOX 25912
City-State-Zip: TAMPA FL 33622

Title VP
Name KEMP, TERRY A
Address POST OFFICE BOX 25912
City-State-Zip: TAMPA FL 33622

Title PRESIDENT
Name SMALL, ANGELA
Address PO BOX 25912
City-State-Zip: TAMPA FL 33622

Title SECRETARY
Name SMALL, ALCENIA
Address PO BOX 25912
City-State-Zip: TAMPA FL 33622

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: ANTONIO CHASE

TREASURER

04/29/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LEEKES, TANYA
Address	PO BOX 25912
City-State-Zip:	TAMPA FL 33622