## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006495

Entity Name: TAMPA CATHOLIC HIGH SCHOOL, INC.

**FILED** Apr 04, 2019 **Secretary of State** 0071555027CC

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

4630 N. ROME AVE. TAMPA. FL 33603

## **Current Mailing Address:**

4630 N. ROME AVE. TAMPA. FL 33603

FEI Number: 59-0974460 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DIVITO, JOSEPH A. ESQ. 4514 CENTRAL AVE. ST. PETERSBURG, FL 33711 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: JOSEPH A. DIVITO 04/04/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

Title VC, TRUSTEE Title CHAIRMAN, TRUSTEE MORRIS, ROBERT REV Name MURPHY, FRANK V Name

6363 NINTH AVE. NORTH Address 6363 NINTH AVE. NORTH Address

City-State-Zip: ST. PETERSBURG FL 33710 ST. PETERSBURG FL 33710 City-State-Zip:

Title VP, TRUSTEE Title TREASURER, SECRETARY

Name PASTURA, CHRISTOPHER SIGNORE, PHILIP P Name Address 6363 NINTH AVENUE NORTH Address 6363 NINTH AVE. NORTH ST. PETERSBURG FL 33710 City-State-Zip: ST. PETERSBURG FL 33710

Title **TRUSTEE** 

City-State-Zip:

LATIMER, CRAIG Name

601 EAST KENNEDY BLVD. 16TH Address

**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.

04/04/2019 SIGNATURE: FRANK MURPHY **CHAIR** 

Date