

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008022

Entity Name: TAMPA BAY PARALEGAL ASSOCIATION, INC.**Current Principal Place of Business:**2002 NORTH LOIS AVENUE
SUITE 610
TAMPA, FL 33607**Current Mailing Address:**P O BOX 2840
TAMPA, FL 33601**FEI Number: 27-1010145****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, LEONARD H. ESQ.
601 BAYSHORE BLVD.
SUITE 700
TAMPA, FL 33606 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:** LEONARD H. JOHNSON**02/14/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name MARTINEZ-JONES, DANA
Address 2002 N. LOIS AVENUE
 SUITE 610
City-State-Zip: TAMPA FL 33607

Title TREASURER
Name COOK, MELISSA
Address 225 E. LEMON STREET
 SUITE 300
City-State-Zip: LAKELAND FL 33801

Title 2ND VP, VP
Name LEE, SUSAN
Address 1300 N. WESTSHORE BLVD
 STE. 220
City-State-Zip: TAMPA FL 33607

Title SECRETARY
Name TURLEY, KATIE K.
Address 601 BAYSHORE BLVD.
 SUITE 700
City-State-Zip: TAMPA FL 33606

Title PRESIDENT-ELECT
Name BURGOS, ERIKA
Address 217 NORTH HOWARD AVE
 STE. 102
City-State-Zip: TAMPA FL 33606

Title 1ST VP
Name SCHROEDER, ELAINE LOUISE
Address P O BOX 2840
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: DANA MARTINEZ-JONES**PRESIDENT****02/14/2017**

Electronic Signature of Signing Officer/Director Detail

Date