

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000008022

Entity Name: TAMPA BAY PARALEGAL ASSOCIATION, INC.**Current Principal Place of Business:**4126 26TH AVENUE NORTH
ST. PETERSBURG, FL 33713**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:**BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 NORTH HIGHLAND AVE
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	DP
Name	DEANTONEO, YVONNE
Address	13577 FEATHER SOUND DRIVE #390
City-State-Zip:	CLEARWATER FL 33762

Title	DVP
Name	CLOSUIT, EMILY
Address	8735 HENDERSON RD
City-State-Zip:	TAMPA FL 33634

Title	DS
Name	BRENNAN, HOLLEY
Address	1005 N. MARION STREET
City-State-Zip:	TAMPA FL 33602

Title	DVP
Name	O'SHAUGHNESSY, BARBARA
Address	601 BAYSHORE BOULEVARD, SUITE 700
City-State-Zip:	TAMPA FL 33606

Title	DVP
Name	BROWN, JAN
Address	4830 W. KENNEDY BLVD. SUITE 550
City-State-Zip:	TAMPA FL 33609

Title	DT
Name	POSTON, THELMA
Address	501 E. KENNEDY BLVD. SUITE 1700
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.

SIGNATURE: YVONNE DEANTONEO**PRESIDENT****03/11/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date