

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000005638

Entity Name: RETROUVAILLE OF TAMPA BAY, INC.**Current Principal Place of Business:**12100 SEMINOLE BLVD., #349
LARGO, FL 33778**Current Mailing Address:**12100 SEMINOLE BLVD., #349
LARGO, FL 33778 US**FEI Number:** 26-4818359**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CLARK, PATRICK
12100 SEMINOLE BLVD., #349
LARGO, FL 33778 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:** PATRICK CLARK

04/08/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title COORDINATOR
Name CLARK, PATRICK
Address 12100 SEMINOLE BLVD. #349
City-State-Zip: LARGO FL 33778

Title COORDINATOR
Name CLARK, JOYCE
Address 12100 SEMINOLE BLVD. #349
City-State-Zip: LARGO FL 33778

Title ASSISTANT COORDINATOR
Name WEAVER, LUKE
Address 2409 PINECREST DRIVE
City-State-Zip: LUTZ FL 33549

Title ASSISTANT COORDINATOR
Name WEAVER, LEAH
Address 2409 PINECREST DRIVE
City-State-Zip: LUTZ FL 33549

Title SECRETARY
Name ANKIAH, YOGEN
Address 5643 BAYWATER DRIVE
City-State-Zip: TAMPA FL 33615

Title SECRETARY
Name NAIDOO, NADINE
Address 5643 BAYWATER DRIVE
City-State-Zip: TAMPA FL 33615

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: PATRICK CLARK

COORDINATOR

04/08/2015

Electronic Signature of Signing Officer/Director Detail

Date