

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000011300

**Entity Name:** TOBACCO PREVENTION NETWORK OF FLORIDA, INC.

**Current Principal Place of Business:**

3035 SE MARICAMP ROAD  
SUITE 104 - 204  
OCALA, FL 34471

**Current Mailing Address:**

3035 SE MARICAMP ROAD  
SUITE 104 - 204  
OCALA, FL 34471 US

**FEI Number:** 27-1378909

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TOBACCO PREVENTION NETWORK OF FLORIDA, INC  
3035 SE MARICAMP ROAD  
SUITE 104 - 204  
OCALA, FL 34471 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:** BARRY HUMMEL, JR., MD

04/30/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP, TREASURER  
Name HARRINGTON, THOMAS J  
Address 3035 SE MARICAMP ROAD  
SUITE 104 - 204  
City-State-Zip: Ocala FL 34471

Title PRESIDENT  
Name SPENCER, JESSICA MARIE ED.D  
Address 3035 SE MARICAMP ROAD  
SUITE 104 - 204  
City-State-Zip: Ocala FL 34471

Title SECRETARY  
Name MARTINASEK, MARY PAUTLER PHD  
Address 3035 SE MARICAMP ROAD  
SUITE 104 - 204  
City-State-Zip: Ocala FL 34471

*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:** BARRY HUMMEL, JR., MD

REGISTERED AGENT

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date