

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

DOCUMENT# N30568

**Entity Name:** THE JESSE A. SPICOLA FOUNDATION, INC.

**Current Principal Place of Business:**

C/O CYNTHIA SPICOLA  
11708 CASEY RD  
TAMPA, FL 33618

**FILED**  
**Apr 22, 2015**  
**Secretary of State**  
**CC9548706477**

**Current Mailing Address:**

C/O CYNTHIA SPICOLA  
11708 CASEY RD  
TAMPA, FL 33618 US

**FEI Number: 59-2973257**

**Certificate of Status Desired: No**

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

SPICOLA, CYNTHIA D.  
11708 CASEY ROAD  
TAMPA, FL 33618 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 D  
Name SPICOLA, JOSEPH JR  
Address 11708 CASEY RD  
City-State-Zip: TAMPA FL 33618

Title D  
Name SPICOLA, CYNTHIA D  
Address C/O CYNTHIA SPICOLA  
11708 CASEY RD  
City-State-Zip: TAMPA FL 33618

Title D  
Name FUENTES, LAWRENCE E  
Address 1407 W. BUSCH BLVD.  
City-State-Zip: TAMPA FL

Title D  
Name SPICOLA, JOSEPH A  
Address 11708 CASEY RD  
City-State-Zip: TAMPA FL 33618

Title D  
Name SPICOLA, JONATHAN  
Address 11708 CASEY RD  
City-State-Zip: TAMPA FL 33618

*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: CYNTHIA D SPICOLA**

**D**

**04/22/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date