

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46518

Entity Name: TAMPA BAY SURVEY AND MAPPING SCHOLARSHIP FUND, INC.**FILED**
Jan 20, 2016
Secretary of State
CC6746171668**Current Principal Place of Business:**5915 LAKE LUTHER ROAD
LAKELAND, FL 33805**Current Mailing Address:**5915 LAKE LUTHER ROAD
LAKELAND, FL 33805 US**FEI Number: 59-3079696****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**COLLINS, DIANNE M
5915 LAKE LUTHER ROAD
LAKELAND, FL 33805 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: DIANNE M COLLINS****01/20/2016**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	D
Name	WACKERMAN, EDWARD
Address	4819 NORTH COLLINS LANE
City-State-Zip:	TAMPA FL 33603

Title	D
Name	SCOTT, JEFFREY
Address	2205 NORTH 20TH STREET
City-State-Zip:	TAMPA FL 33605

Title	T
Name	COLLINS, DIANNE
Address	5915 LAKE LUTHER ROAD
City-State-Zip:	LAKELAND FL 33805

Title	S
Name	FERRANS, JUSTIN
Address	2165 SUNNYDALE BLVD. SUITE D
City-State-Zip:	CLEARWATER FL 33765

Title	VCH
Name	WEST, MARK
Address	10904 N. OREGON CIRCLE
City-State-Zip:	TAMPA FL 33612

Title	CHM
Name	NELSON, KENNETH
Address	2205 NORTH 20TH STREET
City-State-Zip:	TAMPA FL 33605

Title	D, DIRECTOR
Name	CONNOLLY, NED
Address	4803 GEORGE ROAD SUITE 350
City-State-Zip:	TAMPA FL 33634

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: DIANNE M COLLINS**TREASURER****01/20/2016**

Electronic Signature of Signing Officer/Director Detail

Date