

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N51293

**Entity Name:** VOLUNTEERS OF AMERICA COMMUNITY HOUSING AND DEVELOPMENT CORPORATION OF THE TAMPA BAY AREA, INC.**FILED**  
**Jan 09, 2018**  
**Secretary of State**  
**CC2335747625****Current Principal Place of Business:**405 CENTRAL AVE STE 100  
ST PETERSBURG, FL 33701**Current Mailing Address:**405 CENTRAL AVE STE 100  
ST PETERSBURG, FL 33701 US**FEI Number: 58-2030719****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**JENNEWEIN, JONATHAN P  
101 E. KENNEDY BLVD.  
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            PRESIDENT/CEO  
Name            STRINGFELLOW, JANET M  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title            T  
Name            SHEPHERDSON, EDWIN A  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title            SECRETARY  
Name            HARVEY, MAURICE R DR.  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title            CHAIRMAN  
Name            HOUSSIAN, DAVID  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title            VC  
Name            BUENO, ALEX  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title            DIRECTOR  
Name            ANDERSON, KRISTIN  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title            DIRECTOR  
Name            GUTIERREZ, HELEN  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title            DIRECTOR  
Name            KITCHINGS, HAROLD  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

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*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: JANET M. STRINGFELLOW****PRESIDENT/CEO****01/09/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name TABANO, STEPHEN  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR  
Name EVANS, MELODY  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR  
Name RUNYON, KENT  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR  
Name TUTWILER, ALLISON  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR  
Name GOODWIN, THOMAS  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701