

2022 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**
Aug 17, 2022
Secretary of State
9648222992CC**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:**STRINGFELLOW, JANET M
405 CENTRAL AVE STE 100
ST PETERSBURG, FL 33701 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: JANET M. STRINGFELLOW****08/17/2022**

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** CHAIRMAN
Name HARVEY, MAURICE R DR.
Address 405 CENTRAL AVE STE 100
City-State-Zip: ST PETERSBURG FL 33701**Title** DIRECTOR
Name WHITAKER, ALLISON
Address 405 CENTRAL AVE STE 100
City-State-Zip: ST PETERSBURG FL 33701**Title** VC
Name GOODWIN, THOMAS
Address 405 CENTRAL AVE STE 100
City-State-Zip: ST PETERSBURG FL 33701**Title** TREASURER
Name EVANS, MELODY
Address 405 CENTRAL AVE STE 100
City-State-Zip: ST PETERSBURG FL 33701**Title** DIRECTOR
Name BOWMAN, THOMAS
Address 405 CENTRAL AVE STE 100
City-State-Zip: ST PETERSBURG FL 33701**Title** DIRECTOR
Name REYNOLDS, SPENCER
Address 405 CENTRAL AVE STE 100
City-State-Zip: ST PETERSBURG FL 33701**Title** SECRETARY
Name MESA, IVAN
Address 405 CENTRAL AVE STE 100
City-State-Zip: ST PETERSBURG FL 33701**Continues on page 2**

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****08/17/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name VIAMONTES, BETTY
Address 405 CENTRAL AVE
SUITE 100
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR
Name RIGG, KHARY
Address 405 CENTRAL AVE
SUITE 100
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR
Name THROWER, DEBRA
Address 405 CENTRAL AVE
SUITE 100
City-State-Zip: ST PETERSBURG FL 33701