

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000002807

**Entity Name:** PAINE COLLEGE NATIONAL ALUMNI ASSOCIATION FLORIDA  
SUNSHINE STATE CHAPTER, INC.

**FILED**  
**Feb 14, 2024**  
**Secretary of State**  
**0279290576CC**

**Current Principal Place of Business:**

7543 TERRANCE RIVER DRIVE  
TAMPA, FL 33637

**Current Mailing Address:**

7543 TERRANCE RIVER DRIVE  
TAMPA, FL 33637 US

**FEI Number: 86-2648861**

**Certificate of Status Desired: Yes**

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

BRINSON, LEWIS  
7543 TERRANCE RIVER DRIVE  
TAMPA, FL 33637 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 P  
Name BRINSON, LEWIS  
Address 7543 TERRANCE RIVER DRIVE  
City-State-Zip: TAMPA FL 33637

Title VP  
Name GAMBRELL, DARREN L  
Address 8202 EAGLE ISLES PLACE  
City-State-Zip: BRADENTON FL 34212

Title SEC  
Name WILLIAMS-BRIDGETT, DIANE  
Address 2820 N CENTRAL AVE  
City-State-Zip: TAMPA FL 33602

Title TREA  
Name GREENE, GARY T  
Address 14817 17TH AVE. E.  
City-State-Zip: BRADENTON FL 34212

*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: GARY T GREENE**

**TREASURER**

**02/14/2024**

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

\_\_\_\_\_  
Date