

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 20, 2000 8:00 am
Secretary of State

01-20-2000 90156 045 ****70.00

DOCUMENT # 729217

1. Entity Name

CHILDREN'S CANCER CENTER, INC.

Principal Place of Business

Mailing Address

1 DAVIS BLVD
 SUITE 604
 TAMPA FL 33606
 US

1 DAVIS BLVD
 SUITE 604
 TAMPA FL 33606-3480
 US

00006256



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

4901 W. Cypress St.

4901 W. Cypress St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Tampa, FL

City & State
 Tampa, FL

4. FEI Number
 59-1779035

Applied For
 Not Applicable

Zip
 33607

Country

Zip
 33607

Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FIENGO, JOHN F
 ONE DAVIS BLVD, SUITE 604
 TAMPA FL 33606

Name
 MARY ANN MASSOLIO
 Street Address (P.O. Box Number is Not Acceptable)
 4901 W. Cypress St.
 Tampa
 City FL Zip Code
 33607

8. 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 *Mary Ann Massolio*
 SIGNATURE (Typed or printed name of registered agent and title if applicable.)
 MARY ANN MASSOLIO

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
 FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

Make Check Payable to
 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ED FIENGO, JOHN F 1 DAVIS BLVD., SUITE 604 TAMPA FL | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S VIESON, JULIE 501 E. KENNEDY BLVD TAMPA FL 33602 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | CB FERRIS, DIANNE 11736 LIPSEY ROAD TAMPA FL 33618 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T CASPER, SUSAN 905 S. DAKOTA ST. TAMPA FL 33606 | <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VC SMITH, HUGH 11736 LIPSEY RD TAMPA FL 33618 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD JUDISCH, JANIFER 1 DAVIS BLVD, SUITE 604 TAMPA FL | <input type="checkbox"/> Delete |

| | | |
|--|---|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Interim Director MARY ANN MASSOLIO 4901 W. Cypress St. Tampa, FL 33607 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Chairman - Elect | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Secretary Susan Gage 2614 Sunset Dr. Tampa, FL 33629 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Treasurer John Lowry 3302 San Nicolas Tampa, FL 33611 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | Chairman | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary Ann Massolio*
 SIGNATURE (Typed or printed name of signing officer or director)
 Mary Ann Massolio

1-4-00 (813) 356-1148
 Date Daytime Phone #

CR2F037 (9/99)