2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 08, 2002 8:00 am
Secretary of State
05-08-2002 90012 013 ****61.25

0041459

DOCUMENT # N06924

1. Entity Name

ALL CHILDREN'S HOSPITAL FOUNDATION, INC.

Principal Place of Business	Mailing Address
%J. DENNIS SEXTON 801 SIXTH STREET. SOUTH ST. PETERSBURG FL 33701 US	%J. DENNIS SEXTON 801 SIXTH STREET. SOUTH ST. PETERSBURG FL 33701 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2481738 ☐ Applied For ☐ Not Applicable

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
SEXTON, J. DENNIS 801 SIXTH STREET, SOUTH ST. PETERSBURG FL 33701	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (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	PD SEXTON, J. DENNIS 801 SIXTH ST S ST PETERSBURG FL 33701	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD STENBERG, ARNOLD T JR. 801 SIXTH STREET SOUTH ST PETERSBURG FL 33701	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MOMBERG, JOEL 801 6TH ST. S. ST PETERSBURG FL 33701	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MASON, DAVID L PO BOX 1930 BOCA GRANDE FL 33921-1930	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SHELTON, TERESA D 4830 WINDMILL PALM TERR NE ST PETERSBURG FL 33703-6307	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CT ADCOCK, LOUIE N JR PO BOX 387 SAINT PETERSBURG FL 33731	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/01)

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: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/02 (727)892-4401
Date Daytime Phone #

ATTACHMENT

ALL CHILDREN'S HOSPITAL FOUNDATION, INC.
E.I.N. 59-2481738 1651933
2002 Uniform Business Report

Additional Officers & Trustees

Name and Address	Title
CT **Frank J. Rief, III** P.O. Box 1823 Tampa, FL 33601-1823	**Vice Chair/Trustee**
TTR **Jack W. Kirkland, Jr.** 13577 Feather Sound Drive Suite 400 Clearwater, FL 34622	**Treasurer/Trustee**
STR **J. Mark Stroud** 450 Carillon Parkway Suite 200 St. Petersburg, FL 33716	**Secretary/Trustee**
T **Jerry L. Barbosa, M.D.** 801 6th Street South Box 7850 St. Petersburg, FL 33701	**Trustee**
T **Forrest J. Boushall** 4600 W. Cypress Street Tampa, FL 33607	**Trustee**
T **Steven B. Chapman** 3051 Tech Drive St. Petersburg, FL 33716	**Trustee**
T **Paul Dresselhaus** 101 E. Kennedy Boulevard 16th Floor Tampa, FL 33602	**Trustee**

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ALL CHILDREN'S HOSPITAL FOUNDATION, INC.
E.I.N. 59-2481738 1651933
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Additional Officers & Trustees

Name and Address	Title
T **Holger D. Gleim** 150 Second Avenue North Suite 1100 St. Petersburg, FL 33701	**Trustee**
T **William R. Lane, Jr.** 400 North Ashley Drive Suite 2300 Tampa, FL 33602	**Trustee**
T **Stanley I. Levy** 101 East Kennedy Blvd. Suite 3850 Tampa, FL 33602-5152	**Trustee**
T **Abby Misemer** 7328 Burns Point Circle New Port Richey, FL 34652-1311	**Trustee**
T **Barbara Ryals** P.O. Box 9090 Clearwater, FL 34618-9090	**Trustee**
T **Myrtle H. Williams** P.O. Box 13489 St. Petersburg, FL 33733	**Trustee**