

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46100

FILED
Apr 28, 2009
Secretary of State

Entity Name: PEDIATRIC CANCER FOUNDATION, INC.

Current Principal Place of Business:

5550 WEST EXECUTIVE DR, SUITE 300
TAMPA, FL 33609 US

New Principal Place of Business:

Current Mailing Address:

5550 WEST EXECUTIVE DR, SUITE 300
TAMPA, FL 33609 US

New Mailing Address:

FEI Number: 59-3097333

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARPER, DAVID C
FOLEY & LARDNER, LLP
100 N TAMPA STREET, SUITE 2700
TAMPA, FL 336013391 US

Name and Address of New Registered Agent:

F & L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 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: ALBERT P. SILVA, VICE PRES.

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MILLER, WILLIAM
Address: 4520 FERN CROFT CIRCLE
City-St-Zip: TAMPA, FL 33609

Title: TD () Delete
Name: THOMPSON, SUSAN
Address: 4205 WEST LEONA STREET
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: GARCIA, MANUEL
Address: 1700 S. MC DILL AVE, SUITE 260
City-St-Zip: TAMPA, FL 33629

Title: VD () Delete
Name: HARROD, CHAD
Address: 777 S. HARBOUR ISLAND BLVD, STE 877
City-St-Zip: TAMPA, FL 33602

Title: D () Delete
Name: LABANCA, GEORGE
Address: 4002 GANDY BLVD
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: LANGFORD, JOHN J
Address: 2002 NORTH LOIS AVENUE, SUITE 800
City-St-Zip: TAMPA, FL 33607

Title: VD (X) Change () Addition
Name: HARROD, CHAD
Address: 5550 WEST EXECUTIVE DRIVE, SUITE 550
City-St-Zip: TAMPA, FL 33609

Title: D (X) Change () Addition
Name: LOAR, WILLIS C
Address: 201 EAST KENNEDY BOULEVARD, SUITE 1800
City-St-Zip: TAMPA, FL 33602

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHAD W. HARROD

VD

04/28/2009

Electronic Signature of Signing Officer or Director

Date