## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000000678

Jan 25, 2010 Secretary of State

FILED

Entity Name: 211 TAMPA BAY CARES, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

50 S. BELCHER RD.

STE. 116

CLEARWATER, FL 33765

**New Mailing Address: Current Mailing Address:** 

50 S. BELCHER RD.

STE. 116

CLEARWATER, FL 33765

FEI Number: 59-3355555 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

THOMPSON, MICKI 50 S. BELCHER RD.

SUITE 116

CLEARWATER, FL 33765 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

## **OFFICERS AND DIRECTORS:**

PETERSEN, GRANT Name: Address: 100 N. TAMPA ST. City-St-Zip: TAMPA, FL 33602

Title: V/D

Name: TABOR, SANDRA Address: 1801 72ND AVE. NE

City-St-Zip: SAINT PETERSBURG, FL 33702

Title:

CADDELL, TIM Name: Address: 770 52ND ST.

City-St-Zip: PINELLAS PARK, FL 33781

Title: D

Name: MILLS, JAMES Address: 1092 - 42ND AVE. NE City-St-Zip: ST. PETERSBURG, FL 33703

Title:

Name: CATANESE, GEORGE 880 CARILLON PARKWAY Address: City-St-Zip: ST. PETERSBURG, FL 33733

Title:

RICH, MARION Name: Address: 2135 CAMDEN WAY CLEARWATER, FL 33759 City-St-Zip:

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: GRANT PETERSEN C/D 01/25/2010