

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729093

FILED
Apr 05, 2005
Secretary of State

Entity Name: THE TAMPA GENERAL HOSPITAL FOUNDATION, INC.

Current Principal Place of Business:

2 COLUMBIA DR.
RM. H-149
TAMPA, FL 33606 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 1289
TAMPA, FL 33601 US

New Mailing Address:

FEI Number: 23-7354477

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THAYER, STELLA F ESQ
400 N. TAMPA ST.
SUITE 2300
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

NOUSS, MARK A ESQ
16510 MILLAN DE AVILA
TAMPA, FL 33613 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: MARK A. NOUSS, ESQ.

04/05/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: GUYTON, BRYAN J
Address: 100 N BRUSH ST. #440
City-St-Zip: TAMPA, FL 33602

Title: C () Delete
Name: THAYER, STELLA F ESQ
Address: 400 N. TAMPA ST., SUITE 2300
City-St-Zip: TAMPA, FL 33602

Title: TD () Delete
Name: TOUCHTON, JOHN T JR.
Address: 1700 S. MACDILL AVE., SUITE 340
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: CAREY, LARRY C MD
Address: 4 COLUMBIA DR STE. 430A
City-St-Zip: TAMPA, FL 33606

Title: D () Delete
Name: SILVA, ALBERT J
Address: 6404 RENWICK CR
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: NOUSS, MARK A ESQ
Address: 16510 MILLAN DE AVILA
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VC (X) Change () Addition
Name: GUYTON, BRYAN J
Address: 100 N BRUSH ST. #440
City-St-Zip: TAMPA, FL 33602

Title: D (X) Change () Addition
Name: DINGLE, PHILLIP S
Address: 4516 WATROUS AVE.
City-St-Zip: TAMPA, FL 33629

Title: T (X) Change () Addition
Name: TOUCHTON, JOHN T JR.
Address: 1700 S. MACDILL AVE., SUITE 340
City-St-Zip: TAMPA, FL 33629

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

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

Title: C (X) Change () Addition
Name: NOUSS, MARK A ESQ
Address: 16510 MILLAN DE AVILA
City-St-Zip: TAMPA, FL 33613

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARK A. NOUSS, ESQ.

C

04/05/2005

Electronic Signature of Signing Officer or Director

Date