

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000525

FILED  
Jul 09, 2007  
Secretary of State

Entity Name: TAMPA BAY HEALTHCARE COLLABORATIVE, INC.

**Current Principal Place of Business:**

PO BOX 408  
VALRICO, FL 335950408

**New Principal Place of Business:**

1189 N.E. CLEVELAND ST.  
CLEARWATER, FL 33756

**Current Mailing Address:**

PO BOX 408  
VALRICO, FL 335950408

**New Mailing Address:**

PO BOX 408  
VALRICO, FL 33595

FEI Number: 54-2080380      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

NATHAN, KAREN  
2215 E HENRY AVE  
TAMPA, FL 33610      US

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

KELLY, KATE  
1189 NE CLEVELAND ST  
CLEARWATER, FL 33755      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: KATE KELLY

07/09/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: FLEISHMAN, ROSEMARY  
Address: 2810 N. 35TH ST.  
City-St-Zip: TAMPA, FL 33605

Title: TD      ( ) Delete  
Name: RENFROW, CHRIS  
Address: 915 CHESTNUT STREET  
City-St-Zip: CLEARWATER, FL 337565643

Title: D      ( ) Delete  
Name: BERRY, ESTRELLITA  
Address: 742 N. 56TH STREET., STE. 385  
City-St-Zip: TAMPA, FL 33617

Title: SBOD      ( ) Delete  
Name: HARTON, JANA  
Address: 2 COLUMBIA DR., RM F145  
City-St-Zip: TAMPA, FL 33606

Title: PBOD      ( ) Delete  
Name: NATHAN, KAREN  
Address: 2215 E. HENRY AVE.  
City-St-Zip: TAMPA, FL 33610

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD      (X) Change ( ) Addition  
Name: KELLEY, KATE  
Address: 1189 NE CLEVELAND STREET  
City-St-Zip: CLEARWATER, FL 33755

Title: VPD      (X) Change ( ) Addition  
Name: RENFROW, CHRIS  
Address: 915 CHESTNUT STREET  
City-St-Zip: CLEARWATER, FL 337565643

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

Title: TD      (X) Change ( ) Addition  
Name: HOCHSPRUNG, ANNE  
Address: 5771 ROOSEVELT BLVD  
City-St-Zip: CLEARWATER, FL 33760

Title: SBOD      (X) Change ( ) Addition  
Name: PIECHOWSKI, DEBBIE  
Address: PO BOX 408  
City-St-Zip: VALRICO, FL 33595

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: KATE KELLEY

PBOD

07/09/2007

Electronic Signature of Signing Officer or Director

Date