

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000678

FILED
Jan 25, 2011
Secretary of State

Entity Name: 211 TAMPA BAY CARES, INC.

Current Principal Place of Business:

50 S. BELCHER RD.
STE. 116
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

50 S. BELCHER RD.
STE. 116
CLEARWATER, FL 33765

New Mailing Address:

FEI Number: 59-3355555

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOMPSON, MICKI
50 S. BELCHER RD.
SUITE 116
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

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:

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

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

Title: D
Name: CADDELL, TIM
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: T/D
Name: CATANESE, GEORGE
Address: 880 CARILLON PARKWAY
City-St-Zip: ST. PETERSBURG, FL 33733

Title: S/D
Name: REICH, KAREN
Address: 10300 4TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33716

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: MICKI THOMPSON

ED

01/25/2011

Electronic Signature of Signing Officer or Director

Date