

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 703423

**Entity Name:** THE CHILDREN'S HOME, INC.**Current Principal Place of Business:**10909 MEMORIAL HWY  
TAMPA, FL 33615-2511**Current Mailing Address:**10909 MEMORIAL HWY  
TAMPA, FL 33615-2511 US**FEI Number:** 59-0696284**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CONNOLLY, MARK A  
BANK OF AMERICA PLAZA, SUITE 2800  
101 EAST KENNEDY BOULEVARD  
TAMPA, FL 33602 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 CONNOLLY

03/20/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	CHAIR	Title	FIRST VICE CHAIR
Name	DOGALI, HOPE	Name	KENNEDY, CAITLIN
Address	10909 MEMORIAL HWY	Address	10909 MEMORIAL HWY
City-State-Zip:	TAMPA FL 33615-2511	City-State-Zip:	TAMPA FL 33615-2511
Title	SECOND VICE CHAIR	Title	SECRETARY
Name	NEWMAN, MERIDETH	Name	ADAMS, CHERYL
Address	10909 MEMORIAL HWY	Address	10909 MEMORIAL HWY
City-State-Zip:	TAMPA FL 33615-2511	City-State-Zip:	TAMPA FL 33615-2511
Title	TREASURER	Title	ASST. TREASURER
Name	NEWMAN, ALISON	Name	RINKER, CHRIS
Address	10909 MEMORIAL HWY	Address	10909 MEMORIAL HWY
City-State-Zip:	TAMPA FL 33615-2511	City-State-Zip:	TAMPA FL 33615-2511
Title	CEO	Title	CFO
Name	RICKUS, IRENE	Name	KILEY, MARY LU
Address	10909 MEMORIAL HWY	Address	10909 MEMORIAL HWY
City-State-Zip:	TAMPA FL 33615-2511	City-State-Zip:	TAMPA FL 33615-2511

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:** MARY LU KILEY

CFO

03/20/2017

Electronic Signature of Signing Officer/Director Detail

Date