

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

DOCUMENT# 729217

**Entity Name:** CHILDREN'S CANCER CENTER, INC.

**Current Principal Place of Business:**

4901 W CYPRESS ST  
TAMPA, FL 33607

**Current Mailing Address:**

4901 W CYPRESS ST  
TAMPA, FL 33607 US

**FEI Number:** 59-1779035

**Certificate of Status Desired:** No

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

O'LEARY, PATRICIA JCOO  
4901 W CYPRESS ST  
TAMPA, FL 33607 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

**Officer/Director Detail :**

Title CEO & EXECUTIVE DIRECTOR, CEO  
Name O'LEARY, PATRICIA  
Address 4901 W CYPRESS ST  
City-State-Zip: TAMPA FL 33607

Title BOARD MEMBER  
Name FRASER, GRAEME  
Address 4901 W CYPRESS ST  
City-State-Zip: TAMPA FL 33607

Title BOARD MEMBER  
Name SULTENFUSS, WILLIAM  
Address 4901 W CYPRESS ST  
City-State-Zip: TAMPA FL 33607

Title BOARD MEMBER  
Name HANLON, MARION  
Address 4901 W CYPRESS ST  
City-State-Zip: TAMPA FL 33607

Title CHAIR  
Name BAILEY, TEE ANN  
Address 4901 W CYPRESS ST  
City-State-Zip: TAMPA FL 33607

Title BOARD MEMBER  
Name ANDERSON, SCOTT  
Address 2311 W. MORRISON AVE  
UNIT 27  
City-State-Zip: TAMPA FL 33629

Title BOARD MEMBER  
Name BENNETT, PETE  
Address 209 S. WOODLYNNE AVE  
City-State-Zip: TAMPA FL 33611

Title BOARD MEMBER  
Name HUNTER GREENE, TINA  
Address 6002 YEATS MANOR DR.  
#101  
City-State-Zip: TAMPA FL 33616

**Continues on page 2**

*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:** PATRICIA O'LEARY

**CEO**

**01/18/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title BOARD MEMBER  
Name KAISER, VIKKI  
Address 4300 W. CYPRESS ST.  
#850  
City-State-Zip: TAMPA FL 33607

Title BOARD MEMBER  
Name MILLER, DAVID  
Address 6904 CYPRESS PARK DR.  
City-State-Zip: TAMPA FL 33634

Title BOARD MEMBER  
Name NEWMAN, WILLIAM  
Address 4750 E. ADAMO DR.  
City-State-Zip: TAMPA FL 33605

Title FINANCE COMMITTEE CHAIR  
Name VAUGHAN, LAN  
Address 303 MAIN ST.  
UNIT 812  
City-State-Zip: SAFETY HARBOR FL 34695

Title BOARD MEMBER  
Name CARAS, SABRINA  
Address 2803 W PEARL AVE  
City-State-Zip: TAMPA FL 33611

Title BOARD MEMBER  
Name WHITWAM, EMILY  
Address 7409 N HIGHLAND AVE  
City-State-Zip: TAMPA FL 33604

Title BOARD MEMBER  
Name KUMAR, MUDRA MD  
Address 2 TAMPA GENERAL CIRCLE  
City-State-Zip: TAMPA FL 33606

Title SECRETARY  
Name MORAITES, PATRICK  
Address 211 S. WESTLAND AVE  
#3  
City-State-Zip: TAMPA FL 33606

Title BOARD MEMBER  
Name TEBBI, CAMERON MD  
Address 2 TAMPA GENERAL CIRCLE, 5TH FL  
City-State-Zip: TAMPA FL 33606

Title BOARD MEMBER  
Name VERSAGGI, JENNIFER  
Address 8548 N. DALE MABRY HWY.  
City-State-Zip: TAMPA FL 33614

Title BOARD MEMBER  
Name LOWRY, JOHN  
Address 5702 W INTERBAY BLVD  
City-State-Zip: TAMPA FL 33606

Title BOARD MEMBER  
Name LEVY, CASSIE  
Address 5007 W LEONA ST  
City-State-Zip: TAMPA FL 33629