## **2023 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 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: PATRICIA O'LEARY 03/21/2023

Electronic Signature of Registered Agent

Date

FILED Mar 21, 2023

**Secretary of State** 

9420182962CC

Officer/Director Detail:

Title CEO & EXECUTIVE DIRECTOR, CEO Title PAST CHAIR

NameO'LEARY, PATRICIANameSULTENFUSS, WILLIAMAddress4901 W CYPRESS STAddress4901 W CYPRESS STCity-State-Zip:TAMPA FL 33607City-State-Zip:TAMPA FL 33607

TitleSENIOR ADVISORTitleBOARD MEMBERNameBAILEY, TEE ANNNameKAISER, VIKKI

Address 4901 W CYPRESS ST Address 4300 W. CYPRESS ST.

#850

City-State-Zip: TAMPA FL 33607 City-State-Zip: TAMPA FL 33607

Title BOARD MEMBER Title PAST CHAIRMAN

Name KUMAR, MUDRA MD Name MORAITES, PATRICK

Address 2 TAMPA GENERAL CIRCLE Address 211 S. WESTLAND AVE

City-State-Zip: TAMPA FL 33606 #3

City-State-Zip: TAMPA FL 33606

Title BOARD MEMBER

Name TEBBI, CAMERON MD Title CHAIR ELECT

Address 2 TAMPA GENERAL CIRCLE, 5TH FL Name CARAS, SABRINA

City-State-Zip: TAMPA FL 33606 Address 2803 WEST PEARL AVENUE

City-State-Zip: TAMPA FL 33611

## 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 03/21/2023

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title CHAIRMAN

Name MOREJON, SHIRLEY
Address 101 E KENNEDY BLVD

City-State-Zip: TAMPA FL 33602

Title SECRETARY

Name MALLON, ERICA

Address 4523 S FERNCROFT CIR

City-State-Zip: TAMPA FL 33629

Title BOARD MEMBER

Name SULTENUSS HANLON, MARION

Address 4901 W CYPRESS ST City-State-Zip: TAMPA FL 33607

Title ADVISORY BOARD ELECT

Name QUALE, TOM

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

Address 1511 N WESTSHORE BLVD

500

City-State-Zip: TAMPA FL 33607

Title TREASURER

Name OUELLETTE, SEAN
Address 4901 W CYPRESS ST
City-State-Zip: TAMPA FL 33607

Title ADVISORY BOARD CHAIRMAN

Name MOORE, CASEY
Address 4901 W CYPRESS ST
City-State-Zip: TAMPA FL 33607