

2024 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

03/12/2024

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

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

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

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

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

Title CHAIRMAN
Name CARAS, SABRINA
Address 2803 WEST PEARL AVENUE
City-State-Zip: TAMPA FL 33611

Title PAST CHAIRMAN
Name MOREJON, SHIRLEY
Address 101 E KENNEDY BLVD
City-State-Zip: TAMPA FL 33602

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

03/12/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHAIR ELECT
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 SECRETARY
Name AHARI, CAMERON
Address 160 COLUMBIA DRIVE
#505
City-State-Zip: TAMPA FL 33606

Title MEMBERSHIP CHAIR
Name KUHNS, JAY
Address 12501 TIBBETTS STREET
City-State-Zip: ODESSA FL 33629

Title BOARD MEMBER
Name SAMPSON, JASON
Address 2620 1/2 N DUNDEE ST
City-State-Zip: TAMPA FL 33629

Title BOARD MEMBER
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 BOARD MEMBER
Name BAILEY, BABETTE
Address 3001 W DR. MLK BLVD.
City-State-Zip: TAMPA FL 33607

Title BOARD MEMBER
Name MACRONE, DOMINIC
Address 14836 JOCKEYS RIDGE DR.
City-State-Zip: CHARLOTTE NC 28273