## 2018 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

Date

**FILED** Mar 08, 2018

Secretary of State

CC7528610482

Officer/Director Detail :

Title CEO & EXECUTIVE DIRECTOR, CEO Title **CHAIRMAN** 

O'LEARY, PATRICIA SULTENFUSS, WILLIAM Name Name 4901 W CYPRESS ST 4901 W CYPRESS ST Address Address City-State-Zip: TAMPA FL 33607 TAMPA FL 33607 City-State-Zip:

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

Title **BOARD MEMBER** Title **BOARD MEMBER** Name BENNETT, PETE Name ANDERSON, SCOTT

Address 209 S. WOODLYNNE AVE Address 2311 W. MORRISON AVE

UNIT 27

City-State-Zip: TAMPA FL 33629

Title **BOARD MEMBER** Title **BOARD MEMBER** Name KUMAR, MUDRA MD Name KAISER, VIKKI

2 TAMPA GENERAL CIRCLE Address Address

4300 W. CYPRESS ST. City-State-Zip: TAMPA FL 33606 #850

City-State-Zip:

TAMPA FL 33611

City-State-Zip: TAMPA FL 33607 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.

03/08/2018 SIGNATURE: PATRICIA O'LEARY CEO

## Officer/Director Detail Continued:

Title CHAIR ELECT

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

Title HOUSE & GROUNDS CHAIR

Name KINBACK, ASHLEE Address 111 N ALBANY AVE

4

City-State-Zip: TAMPA FL 33606

Title BOARD MEMBER

Name MACRONE, DOMINIC

Address 4003 CALLE DELPHIN CT

City-State-Zip: TAMPA FL 33611

Title SR. ADVISOR, BOARD MEMBER

Name MOREJON, SHIRLEY
Address 101 E KENNEDY BLVD

City-State-Zip: TAMPA FL 33602

Title BOARD MEMBER
Name SILVER, DAVID

Address 1511 N WESTSHORE BLVD

500

City-State-Zip: TAMPA FL 33607

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

Title MEMBERSHIP CHAIR
Name CARAS, SABRINA

Address 2803 WEST PEARL AVENUE

City-State-Zip: TAMPA FL 33611

Title TREASURER
Name IGNAS, RYAN

Address 11229 SPRING POINT CIR City-State-Zip: RIVERVIEW FL 33579

Title BOARD MEMBER
Name BEATTIE, KEN

Address 1013 ESTATEWOOD DR City-State-Zip: BRANDON FL 33510

Title BOARD MEMBER
Name MOGUL, MARK

Address 3001 W DOC MLK BLVD

City-State-Zip: TAMPA FL 33607

Title BOARD MEMBER

Name O'BRIEN, KATHRYN

Address 3505 W VASCONIA ST

City-State-Zip: TAMPA FL 33629