## 2015 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

**FILED** Mar 31, 2015

**Secretary of State** 

CC0424862656

Officer/Director Detail :

Title COO Title **CHAIR** 

O'LEARY, PATRICIA JCOO Name Name FRASER, GRAEME 4901 W CYPRESS ST 4901 W CYPRESS ST Address Address City-State-Zip: TAMPA FL 33607 TAMPA FL 33607 City-State-Zip:

Title S Title Т

Name HANLON, MARION SULTENFUSS, WILLIAM 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 CHAIR ELECT Name ANDERSON, SCOTT BAILEY. TEE ANN Name

Address 2311 W. MORRISON AVE Address 4901 W CYPRESS ST

UNIT 27

TAMPA FL 33607 City-State-Zip: City-State-Zip: TAMPA FL 33629

Title ADVISORY CO-CHAIR Title PAST CHAIRMAN & STRATEGIC Name

BENNETT, PETE PLANNING CO-CHAIR

Name COMPTON, CARLTON 209 S. WOODLYNNE AVE Address

Address 2897 BAYSHORE TRAILS DRIVE TAMPA FL 33611 City-State-Zip:

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.

03/31/2015 SIGNATURE: GRAEME FRASER **CHAIRMAN** 

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title BOARD MEMBER
Name FERRIS, DIANNE
Address 11736 LIPSEY RD
City-State-Zip: TAMPA FL 33618

Title MEMBERSHIP CO-CHAIR
Name HUNTER GREENE, TINA
Address 6002 YEATS MANOR DR.

#101

City-State-Zip: TAMPA FL 33616

Title BOARD MEMBER
Name KAISER, VIKKI

Address 4300 W. CYPRESS ST.

#850

City-State-Zip: TAMPA FL 33607

Title BOARD MEMBER

Name MCDONOUGH, JOHN PHD
Address 2223 SHADEHILL COURT

City-State-Zip: TAMPA FL 33612

Title BOARD MEMBER

Name MORAITES, PATRICK

Address 211 S. WESTLAND AVE

#3

City-State-Zip: TAMPA FL 33606

Title HOUSE & GROUNDS CHAIR

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

Title BOARD MEMBER

Name TEBBI, CAMERON MD

Address 2 TAMPA GENERAL CIRCLE, 5TH FL

City-State-Zip: TAMPA FL 33606

Title DEVELOPMENT CO-CHAIR

Name VERSAGGI, JENNIFER

Address 8548 N. DALE MABRY HWY.

City-State-Zip: TAMPA FL 33614

Title BOARD MEMBER
Name GAUTIER, RYAN
Address 3739 W. CASS ST.
City-State-Zip: TAMPA FL 33609

Title BOARD MEMBER
Name JOSLIN, TIM

Address 12313 WEXFORD HILLS RD City-State-Zip: RIVERVIEW FL 33569

Title HOSPITAL COMMUNITY RELATIONS

CHAIR

Name KUMAR, MUDRA MD

Address 2 TAMPA GENERAL CIRCLE

City-State-Zip: TAMPA FL 33606

Title MEMBERSHIP CO-CHAIR

Name MILLER, DAVID

Address 6904 CYPRESS PARK DR.

City-State-Zip: TAMPA FL 33634

Title BOARD MEMBER

Name MOSCHEL, MARISSA

Address 3524 VILLAGE WAY

City-State-Zip: TAMPA FL 33629

Title BOARD MEMBER
Name RESNICK, JARED
Address 1610 N. 19TH ST.
City-State-Zip: TAMPA FL 33605

Title BOARD MEMBER
Name VAUGHAN, LAN
Address 303 MAIN ST.
UNIT 812

City-State-Zip: SAFETY HARBOR FL 34695