2016 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 24, 2016

Secretary of State

CC8861774596

Officer/Director Detail :

Title COO & EXECUTIVE DIRECTOR Title **BOARD MEMBER** O'LEARY, PATRICIA Name Name FRASER, GRAEME 4901 W CYPRESS ST 4901 W CYPRESS ST Address Address City-State-Zip: TAMPA FL 33607

City-State-Zip: TAMPA FL 33607

BOARD MEMBER Title Title **HOUSE & GROUNDS CHAIR** 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** Name

ANDERSON, SCOTT Name BAILEY. TEE ANN

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 **BOARD MEMBER**

BENNETT, PETE Name Name COMPTON, CARLTON

209 S. WOODLYNNE AVE Address Address 2897 BAYSHORE TRAILS DRIVE

TAMPA FL 33611 City-State-Zip: TAMPA FL 33611 City-State-Zip:

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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.

03/24/2016 SIGNATURE: PATRICIA O'LEARY EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

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 BOARD MEMBER

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

Title BOARD MEMBER
Name LOWRY, JOHN

Address 5702 W INTERBAY BLVD

City-State-Zip: TAMPA FL 33606

Title BOARD MEMBER

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 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 BECKER, MIKE

Address 6109 SCHOONER WAY

City-State-Zip: TAMPA FL 33615

Title BOARD MEMBER
Name GROSSMAN, CLAY
Address 314 W NORTH STREET

City-State-Zip: TAMPA FL 33604