

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740879

Entity Name: THE SPRING OF TAMPA BAY, INC.**Current Principal Place of Business:**209 N WILLOW AVENUE
TAMPA, FL 33602**Current Mailing Address:**P.O. BOX 5147
TAMPA, FL 33675 US**FEI Number:** 59-1777135**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CFRA, LLC
100 S. ASHLEY DR.
SUITE 400
TAMPA, FL 33602 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

Officer/Director Detail :

Title PCEO
Name MURPHY, MINDY
Address PO BOX 5147
City-State-Zip: TAMPA FL 33675

Title DV
Name RIX, GREGORY S
Address 300 WEST PLATT STREET, SUITE 100
City-State-Zip: TAMPA FL 33606

Title DT
Name HOROWITZ, PAUL
Address 5201 KENNEDY BLVD., SUITE 620
City-State-Zip: TAMPA FL 33609

Title DC
Name FREKING, RYAN
Address 4301 ANCHOR PLAZA PARKWAY,
SUITE 400
City-State-Zip: TAMPA FL 33634

Title DS
Name BENJAMIN, TRIMEKA
Address 514 N. FRANKLIN STREET, #206
City-State-Zip: TAMPA FL 33602

Title CFO
Name CHAMBERLIN, CRAIG
Address PO BOX 5147
City-State-Zip: TAMPA FL 33675

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: CRAIG CHAMBERLIN**CHIEF FINANCIAL
OFFICER****01/12/2015**

Electronic Signature of Signing Officer/Director Detail

Date