2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2014
Secretary of State
CC8680882161

DOCUMENT# N02000009752

Entity Name: CHILDREN'S AIDS FOUNDATION OF TAMPA BAY INC.

Current Principal Place of Business:

4726 SUNRISE DRIVE S.
ST. PETERSBURG, FL 33705

Current Mailing Address:

P.O. BOX 4049
TAMPA, FL 33677 US

FEI Number: 55-0816294

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HILLS, PETER
4726 SUNRISE DRIVE S.
ST. PETERSBURG, FL 33705 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	BOARD OF DIRECTORS
Name	DICKENS, WILLIAM
Address	3709 W. CORONA STREET
City-State-Zip:	TAMPA FL 33629

Title	PRESIDENT
Name	ENGLERT, JAMES
Address	1120 E. KENNEDY BLVD, UNIT 411
City-State-Zip:	TAMPA FL 33602

Title	S
Name	WHITNEY, DIANE
Address	130 CAMELIA COURT
City-State-Zip:	OLDSMAR FL 34677

Title	T
Name	HILLS, PETER
Address	404 S ORLEANS AVE
City-State-Zip:	TAMPA FL 33606

Title	BOD
Name	MARTIN, WAYNE
Address	4726 SUNRISE DRIVE S.
City-State-Zip:	ST PETERSBURG FL 33705

Title	VP
Name	IRWIN, JAMES
Address	1211 EAST CUMBERLAND AVE 906
City-State-Zip:	TAMPA FL 33602

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: PETER HILLS TREASURER 03/05/2014

Electronic Signature of Signing Officer/Director Detail — Date