

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000525

Entity Name: TAMPA BAY HEALTHCARE COLLABORATIVE, INC.**Current Principal Place of Business:**33920 U.S. HWY. 19 N.
SUITE #269
PALM HARBOR, FL 34684**Current Mailing Address:**PO BOX 2252
DUNEDIN, FL 34698**FEI Number:** 54-2080380**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HEPBURN, CAROLINE YVONNE
33920 U.S. HWY 19 N.
SUITE #269
PALM HARBOR, FL 34684 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:** CAROLINE Y. HEPBURN

05/01/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	BEST, ALICIA
Address	33920 U.S. HWY. 19 N. SUITE #269
City-State-Zip:	PALM HARBOR FL 34684

Title	SECRETARY
Name	LANDRY, ARIEL
Address	400 4TH AVENUE SOUTH
City-State-Zip:	ST. PETERSBURG FL 33701

Title	VC
Name	SHOUPPE, CLINT
Address	33920 U.S. HWY. 19 N. SUITE #269
City-State-Zip:	PALM HARBOR FL 34684

Title	DIRECTOR
Name	MILLETTE, LEAH
Address	33920 U.S. HWY. 19 N. SUITE #269
City-State-Zip:	PALM HARBOR FL 34684

Title	CHAIRMAN
Name	LEEDY, LYNDIA
Address	4300 W. CYPRESS STREET
City-State-Zip:	TAMPA FL 33607

Title	EXECUTIVE DIRECTOR
Name	HEPBURN, CARRIE Y
Address	PO BOX 2252
City-State-Zip:	DUNEDIN FL 34698

Title	DIRECTOR
Name	LINDERMAN, BETHANY
Address	33920 U.S. HWY. 19 N. SUITE #269
City-State-Zip:	PALM HARBOR FL 34684

Title	DIRECTOR
Name	MCGEE, MEGAN
Address	33920 U.S. HWY. 19 N. SUITE #269
City-State-Zip:	PALM HARBOR FL 34684

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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.

SIGNATURE: CARRIE Y HEPBURN

EXECUTIVE DIRECTOR

05/01/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BARBER-HEINZ, LEAH
Address 33920 U.S. HWY. 19 N.
 SUITE #269
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR
Name DEAN, LIANA
Address 33920 U.S. HWY. 19 N.
 SUITE #269
City-State-Zip: PALM HARBOR FL 34684