

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000678

Entity Name: 211 TAMPA BAY CARES, INC.**Current Principal Place of Business:**14155 - 58TH ST. N.,
STE. 211
CLEARWATER, FL 33760**Current Mailing Address:**14155 - 58TH ST. N.
SUITE 211
CLEARWATER, FL 33760 US**FEI Number:** 59-3355555**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**THOMPSON, MICKI
14155 - 58TH ST. N.
SUITE 211
CLEARWATER, FL 33760 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 CHAIRMAN
Name	RICH, MARION
Address	2135 CAMDEN WAY
City-State-Zip:	CLEARWATER FL 33759

Title	BOARD VICE CHAIRMAN
Name	LENDERMAN, MARTHA
Address	7268 MOFFATT LANE
City-State-Zip:	PINELLAS PARK FL 33781

Title	BOARD TREASURER
Name	LEHRBURGER, JAMES
Address	302 LOTUS PATH
City-State-Zip:	CLEARWATER FL 33756

Title	BOARD SECRETARY
Name	CORRIVEAU, KIP
Address	1347 N MCMULLEN BOOTH RD UNIT 2
City-State-Zip:	OLDSMAR FL 33759

Title	EXECUTIVE DIRECTOR
Name	THOMPSON, MICKI
Address	14155 - 58TH STREET NORTH SUITE 211
City-State-Zip:	CLEARWATER FL 33760

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: MICKI THOMPSON**EXECUTIVE DIRECTOR****01/25/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date