2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State
04-27-2007 90211 038 ****61.25

DOCUMENT # 708088

1. Entity Name
ALL CHILDREN'S HOSPITAL, INC.

Principal Place of Business	Mailing Address
801 6TH ST SO ST PETERSBURG, FL 33701	801 6TH ST SO ST PETERSBURG, FL 33701

02282007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-0683252 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CARNES, GARY A. 801 SIXTH ST. SOUTH ST PETERSBURG, FL 33701	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CARNES, GARY 801 SIXTH STREET SOUTH SAINT PETERSBURG, FL 33701	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V STENBERG, ARNOLD T JR 801 SIXTH STREET SOUTH ST. PETERSBURG, FL 33701	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CT FEASTER, DAVID 100 2ND AVE N SAINT PETERSBURG, FL 33701	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TT MCCLANATHAN, JEFFREY P 100 2ND AVE S STE 600 SAINT PETERSBURG, FL 33701	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TT MCCLANATHAN, JEFFREY P 150 SECOND AVENUE NORTH, SUITE 650 ST PETERSBURG, FL 33701	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCT SAYLER, VAN C 880 CARILLON PKWY SAINT PETERSBURG, FL 33716	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST CURTIS, WARD J JR 880 CARILLON PKWY SAINT PETERSBURG, FL 33716	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST CURTIS, WARD J JR 200 CENTRAL AVENUE - SUTE 220 ST PETERSBURG, FL 33701	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ ARNOLD T. STENBERG, JR. 727-767-8892
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

ALL CHILDREN'S HOSPITAL, INC.
E.I.N. 59-0683252
2007 UNIFORM BUSNESS REPORT

400866687
#708088

Additional Officers & Trustees

Name and Address	Title
T **BARBOSA, JERRY, M.D.** 880 Sixth Street South, Suite 140 St Petersburg, FL 33701	**Trustee**
T **CANNOVA, MICHAEL** 4204 13th Street Court West Snead Island, FL 34221	**Trustee**
T DORETY, TOM 6801 E. Hillsborough Avenue PO Box 11904 Tampa, FL 3713	**Trustee**
T **DIAMOND, SANDRA** 9075 Seminole Blvd. Seminole, FL 33772	**Trustee**
T **FELTON-DUDLEY, TAMARA** 3110 First Avenue North, Suite W St Petersburg, FL 33713	**Trustee**
T **FLEECE, JOSEPH W, III** 13577 Feather Sound Drive, Suite 550 Clearwater, FL 33762	**Trustee**
T **FREEDMAN, STEVE, PH.D., F.A.A.P.** 18907 Avenue Biarritz Lutz, FL 33358	**Trustee**
T **LETTELLEIR, MARK** 9455 Koger Blvd, Suite 200 St Petersburg, FL 33702	**Trustee**

ATTACHMENT

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#708088

ALL CHILDREN'S HOSPITAL, INC.
E.I.N. 59-0683252
2007 UNIFORM BUSNESS REPORT

Additional Officers & Trustees

Name and Address	Title
T **MONDELLO, MARK** 8070 Stimie Avenue North St Petersburg, FL 33710	**Trustee**
T **MOORE, DAVID** 7806 Tenth Avenue South St Petersburg, FL 33707	**Trustee**
T **SEMBLER, BRENT** 5858 Central Avenue St Petersburg, FL 33707	**Trustee**
T **SHER, CRAIG** 5858 Central Avenue St Petersburg, FL 33707	**Trustee**
T **VAN BUREN, GEORGE, M.D.** 719 39th Street West Bradenton, FL 34205	**Trustee**