AMENDED

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 DEC 18 AM 11:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 714991

1. Entity Name

UNITED METHODIST RETIREMENT CENTER OF TAMPA, INC

| Principal Place of Business | Mailing Address |
|---|---|
| 400 E. HARRISON ST<br>TAMPA FL 33602-3444 | 400 E. HARRISON ST<br>TAMPA FL 33602-3444 |

400002473961 4
11/17/03 01015--029 **61.25

[redacted]

☑ CHECK HERE IF MAKING CHANGES.

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. FEI Number 59-1229023 — 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 |
|---|---|
| TRAYNER, JILL<br>1005 N. FLORIDA AVE.<br>TAMPA FL 33602 | Name: Jim Culp<br>Street Address (P.O. Box Number is Not Acceptable): 4519 Watrous Avenue<br>City: Tampa FL Zip Code: 33629 |

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 Jim Culp, President — Jim Culp — 11/04/2003

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

FILE NOW: FEE IS $61.25

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 | President | ☐ Delete | TITLE | Director | ☐ Change ☒ Addition |
| NAME | CULP, JIM | | NAME | Joan Shaw | |
| STREET ADDRESS | 4519 WATROUS AVE | | STREET ADDRESS | 400 E. Harrison Street, #701 | |
| CITY-ST-ZIP | TAMPA FL 33629 | | CITY-ST-ZIP | Tampa, Florida 33602 | |
| TITLE | Director | ☒ Delete | TITLE | Director | ☐ Change ☒ Addition |
| NAME | CAPITANO, JONELLE | | NAME | Mary Collins | |
| STREET ADDRESS | 807 W VIRGINIA AVE | | STREET ADDRESS | 400 E. Harrison Street, #1107 | |
| CITY-ST-ZIP | TAMPA FL 33603 | | CITY-ST-ZIP | Tampa, Florida 33602 | |
| TITLE | Director | ☐ Delete | TITLE | Director | ☐ Change ☒ Addition |
| NAME | ABDONEY, JIM | | NAME | Theresa Ferlita | |
| STREET ADDRESS | 4710 TAMBAY AVE | | STREET ADDRESS | 3810 Oak Drive North | |
| CITY-ST-ZIP | TAMPA FL 33611 | | CITY-ST-ZIP | Tampa, Florida 33611 | |
| TITLE | D | ☒ Delete | TITLE | Director | ☐ Change ☒ Addition |
| NAME | TRAYNER, JILL | | NAME | David Isbell | |
| STREET ADDRESS | 400 E HARRISON ST | | STREET ADDRESS | 11763 Raintree Drive | |
| CITY-ST-ZIP | TAMPA FL 33602 | | CITY-ST-ZIP | Temple Terrace, Florida 33617 | |
| TITLE | D | ☒ Delete | TITLE | Director | ☐ Change ☒ Addition |
| NAME | BEERY, DAVID | | NAME | Janice Bingham | |
| STREET ADDRESS | 7109 DUNCAN AVE | | STREET ADDRESS | 2511 South Ysabell Avenue | |
| CITY-ST-ZIP | TAMPA FL 33604 | | CITY-ST-ZIP | Tampa, Florida 33629 | |
| TITLE | Director | ☐ Delete | TITLE | Director | ☐ Change ☒ Addition |
| NAME | WILLIAMS, JOYCE | | NAME | Karen Morin | |
| STREET ADDRESS | 1000 S HARBOUR ISLAND BLVD # 2510 | | STREET ADDRESS | 2307 South Hale | |
| CITY-ST-ZIP | TAMPA FL 33606 | | CITY-ST-ZIP | Tampa, Florida 33629 | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.