

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717448

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**Entity Name:** LOUISE GRAHAM REGENERATION CENTER, INC.

**Current Principal Place of Business:**

2301 3RD AVE SOUTH  
ST PETERSBURG, FL 337121646 US

**New Principal Place of Business:**

**Current Mailing Address:**

2301 3RD AVE SOUTH  
ST PETERSBURG, FL 337121646 US

**New Mailing Address:**

**FEI Number:** 59-1305743      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

O'HARA, ARTHUR  
4140 49TH STREET N.  
ST. PETERSBURG, FL 33709 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MARTINO, LEE  
Address: 5830 142ND AVENUE NORTH  
City-St-Zip: CLEARWATER, FL 33760 US

Title: VP  
Name: KENNEDY, THOMAS F  
Address: 3030 N. ROCKY POINT DR W., STE. 560  
City-St-Zip: TAMPA, FL 33626 US

Title: D  
Name: MORIARTY, THOMAS S  
Address: 3637 4TH STREET N, #210  
City-St-Zip: SAINT PETERSBURG, FL 33704 US

Title: T  
Name: TUSHAUS, BRADLEY C  
Address: 611 S MAGNOLIA AVENUE  
City-St-Zip: TAMPA, FL 33606 US

Title: S  
Name: RUPPEL, DENNIS  
Address: 911 CHESTNUT STREET  
City-St-Zip: CLEARWATER, FL 33756 US

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: ARTHUR O'HARA

CEO

02/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date