

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735712

FILED
Apr 29, 2004
Secretary of State**Entity Name:** ALLEGANY FRANCISCAN FOUNDATION, TAMPA BAY, INC.**Current Principal Place of Business:**19329 US HWY 19 N
SUITE 100
CLEARWATER, FL 33764 US**New Principal Place of Business:****Current Mailing Address:**19329 US HWY 19 N
SUITE 100
CLEARWATER, FL 33764 US**New Mailing Address:****FEI Number:** 59-1631325**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LIGHTER, JOANNE O
19329 US HWY 19 NORTH
SUITE 100
CLEARWATER, FL 33764 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: PD () Delete
Name: LIGHTER, JOANNE O
Address: 19329 US HWY 19 N, STE 100
City-St-Zip: CLEARWATER, FL 33764

Title: CD () Delete
Name: KIMMINS, MARGARET M OSF
Address: 115 EAST MAIN STREET
City-St-Zip: ALLEGANY, NY 14706

Title: D () Delete
Name: BERRY, ESTRELLITA
Address: 7402 N 56TH STREET, SUITE 385
City-St-Zip: TAMPA, FL 33617

Title: D () Delete
Name: BERTKE, ROY
Address: 19329 US HWY 19 N., SUITE 100
City-St-Zip: CLEARWATER, FL 33764

Title: S () Delete
Name: SHEARED, RHONDA M
Address: 19329 US HWY 19 N., SUITE 104
City-St-Zip: CLEARWATER, FL 33764

Title: T () Delete
Name: FRIEHE, ANITA A
Address: 19329 US HWY 19 N., SUITE 100
City-St-Zip: CLEARWATER, FL 33764

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JOANNE OLVERA LIGHTER

PD

04/29/2004

Electronic Signature of Signing Officer or Director

Date

WEIDENBORNER, MARLENE OSF D
19329 US HWY 19 N, SUITE 100
CLEARWATER, FL 33764

STAGNARO, KATHLEEN OSF D
19329 US HWY 19 N, SUITE 100
CLEARWATER, FL 33764

SMITH, TREVOR D
10014 N. DALE MABRY HWY, #101
TAMPA, FL 33624

MURMAN, JAMES ESQ D
201 EAST KENNEDY BLVD, SUITE 1700
TAMPA, FL 33602

MICHAUD, RUDY D
19329 US HWY 19 N, SUITE 100
CLEARWATER, FL 33764

KING, GUY D
300 WEST PLATT ST
TAMPA, FL 33606

CARBERRY, JOAN OSF D
19329 US HWY 19 N, SUITE 100
CLEARWATER, FL 33764

BURNS, KAREN OSF D
19329 US HWY 19 N, SUITE 100
CLEARWATER, FL 33764