

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741931

FILED
Jan 06, 2010
Secretary of State

Entity Name: THE CRISIS CENTER OF TAMPA BAY, INC.

Current Principal Place of Business:

ONE CRISIS CENTER PLAZA
TAMPA, FL 33613 US

New Principal Place of Business:

Current Mailing Address:

ONE CRISIS CENTER PLAZA
TAMPA, FL 33613 UA

New Mailing Address:

ONE CRISIS CENTER PLAZA
TAMPA, FL 33613 US

FEI Number: 59-1785265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRAUGHTON, W DAVID
ONE CRISIS CENTER PLAZA
TAMPA, FL 33613 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: D
Name: BUTT, JEFFREY D ESQUIRE
Address: 201 NORTH FRANKLIN STREET, SUITE 2100
City-St-Zip: TAMPA, FL 33602

Title: TD
Name: TRAUD, TIM CPA
Address: 10560 DR. MARTIN LUTHER KING JR ST NO.
City-St-Zip: ST. PETERSBURG, FL 33716

Title: D
Name: MILLER, LINDA A
Address: 732 APALACHEE DRIVE N.E.
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D
Name: BRAUGHTON, W. DAVID
Address: ONE CRISIS CENTER PLAZA
City-St-Zip: TAMPA, FL 33613

Title: CD
Name: TOMLIN, JOHN
Address: 1515 N. WESTSHORE BOULEVARD
City-St-Zip: TAMPA, FL 33607

Title: SD
Name: THOMPSON, KATY CPA
Address: 219 MANATEE LANE
City-St-Zip: TARPON SPRINGS, FL 34689

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: W. DAVID BRAUGHTON

D

01/06/2010

Electronic Signature of Signing Officer or Director

Date