

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743406

FILED
Feb 07, 2009
Secretary of State

Entity Name: RONALD MCDONALD HOUSE CHARITIES OF TAMPA BAY, INC.

Current Principal Place of Business:

401 7TH AVE S.
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

2811 SANDPIPER PL
CLEARWATER, FL 33762 US

New Mailing Address:

FEI Number: 59-1835985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS-PETRIK, JANICE
28 COLUMBIA DR.
TAMPA, FL 33606 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: CD () Delete
Name: AMEEN, ED,
Address: 2811 SANDPIPER PL
City-St-Zip: CLEARWATER, FL 33762

Title: D () Delete
Name: HARRING, JEFF
Address: 1 PROGRESS PLAZA SUITE 165
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: TD () Delete
Name: STRAW, CLAUDIA
Address: P.O. BOX 40888 NA
City-St-Zip: ST PETERSBURG, FL 337430888

Title: SD () Delete
Name: KEANE, DIANE
Address: 6000 BAHAMA SHORES DR S
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: PD () Delete
Name: HONEGGER, DAN
Address: 425 NORTH FLORIDA AVE.
City-St-Zip: TAMPA, FL 33602

Title: VPD () Delete
Name: CRESTA, JOSEPH
Address: 18120 CRANE NEST DR.
City-St-Zip: TAMPA, FL 33647

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:

Title: VPD (X) Change () Addition
Name: HILL, JERRY
Address: 490 FIRST AVE. SOUTH
City-St-Zip: ST. PETERSBURG, FL 33701

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: EDWARD AMEEN

CD

02/07/2009

Electronic Signature of Signing Officer or Director

Date