2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT #768601



FILED 07 MAY 10 PH 3:54

ST. JOSEPH'S ANCILLARY SERVICES, INC.					V		SECR TALL/	ETARY OF MHASSEE,	ESTATE FLORIDA
Principal Place of Business 3001 W DR MARTIN LUTHER KING JR BLVD TAMPA, FL 33607 US Mailing Address 3001 W DR MARTIN LUTH ATTN: ISAAC MALLAH TAMPA, FL 33607 US				BLVD '			171 851 8111 1 131	1 2020 2020 57 70 177 0	11.11.919
2. Principal Place of Business - No P.O. Box # 3. Mailing Address									
Suite, Apt. (*, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		03212007	Chg-NP	CR2	E037 (12/06)	
City & State		City & State	City & State		4. FEI Numbe 59-279				olied For Applicable
Zip	Country	Zip	Country		5. Certificate	of Status Desi	red 🗀	\$8.75 Addi Fee Required	
	6. Name and Address of Current F	Registered Agent	Name		7. Name and	Address of N	ew Register	ed Agent	
MALLAH, ISAAC 3001 W. DR. MARTIN LUTHER KING JR. BLVD. TAMPA, FL 33607					(P.O. Box Number	er is Not Accep	otable)		
IAMIFA, IL	. 33007		City					=∎ Zip Code	
								-L	
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 Signature, hypod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstains) DATE									
Filing Fee is \$61.25 9. Election Camp Due by May 1, 2007 Trust Fund Co				° 🗆	\$5.00 May E Added to Fees			reck payable 9 pertment of 81	
10.	OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CH	ANGES TO O	FICERS AND	DIRECTORS IN	
NAME STREET ADDRESS CITY-ST-ZIP	SD AUBIN, MIKE 3001 W DR MARTIN LUTHER KIN TAMPA, FL 33607	□ Dekde ¥G JR BLVD	TITLE NAME STREET ADDRES CITY-ST-ZIP	55	9573	2001 22/07	030: 01035-		⊃^{□ Addition} 2207.50
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Delete MALLAH, ISAAC 3001 W DR MARTIN LUTHER KING JR BLVD TAMPA, FL 33807			25				☐ Change	Addition
NAME STREET ADDRESS	EVPD LUTTEN, LORRAINE 3001 W DR MARTIN LUTHER KIN TAMPA, FL 33607	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	ss				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VAALER, M 3001 W DR MARTIN LUTHER KIN TAMPA, FL 33807	□ Dekete	TIFLE NAME STREET ADDRES CITY-ST-ZIP	SS				☐ Change	☐ Addition
NAME STREET ADDRESS	D YATES, DIANE 3001 W DR MARTIN LUTHER KIN TAMPA, FL 33607	Ø Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s 300	NELLY, P 1 W DR M PA, FL		UTHER 1	□ Change KING JR F	.X Addition
NAME STREET ADDRESS CITY-ST-ZIP	TD YODER, CATHY 3001 W DR MARTIN LUTHER KIN TAMPA, FL 33607 while the information supplied with the	 	TITLE NAME STREET ADDRES CITY-ST-ZIP		d in Chapter 146			Change	Addition

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 of 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.

IGNATURE:

| SIGNATURE AND TYPED OR PRINTED MyRK OF BURNING OFFICER OR DIRECTOR
| Day of the Chapter Statute | Cha

SIGNATURE!