## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000000716

Apr 26, 2012 Secretary of State

Entity Name: FEDERATION OF FAMILIES FOR CHILDREN'S MENTAL HEALTH OF HILLSBOROUGH COUNTY,

INC

Current Principal Place of Business: New Principal Place of Business:

FMHI BOX 2 BRUCE B. DOWNS BLVD. 7402 N 56TH ST

# 2514 # 880

TAMPA, FL 33612 TAMPA, FL 33617

Current Mailing Address: New Mailing Address:

FMHI BOX 2 BRUCE B. DOWNS BLVD. 7402 N 56TH ST

# 2514 # 880

TAMPA, FL 33612 TAMPA, FL 33617

FEI Number: 59-3695186 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MILLS, TROYLAN . MILLS, TROYLAN .

13301 BRUCE B DOWNS 7402 N. 56TH ST, BLDG 800,

TAMPA, FL 33612 US SUTIE 880 TAMPA, FL 33617 US

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: 04/26/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: F

Name: MILLS, TROYLAN

Address: 7402 N. 56TH ST, BLDG 800, SUITE 880

City-St-Zip: TAMPA, FL 33617

Title: T

Name: MILLER, THERESA

Address: 7402 N. 56TH ST, BLDG 800, SUITE 880

City-St-Zip: TAMPA, FL 33617

Title: VP

Name: BLANCO=PEDROSA, SHELIA

Address: 7402 N. 56TH ST, BLDG 800, SUITE 880

City-St-Zip: TAMPA, FL 33617

Title:

Name: DUCHNOWSKI, ALBERT

Address: 7402 N. 56TH ST, BLDG 800, SUITE 880

City-St-Zip: TAMPA, FL 33617

Title:

Name: MURPHY, ALPHONSO

Address: 7402 N. 56TH ST, BLDG 800, SUITE 880

City-St-Zip: TAMPA, FL 33617

Title: EXE

Name: LARRY, ENGLISH Address: 8706 BEVERLY DR.

City-St-Zip: TEMPLE TERRACE, FL 33617

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: LARRY ENGLISH EXE 04/26/2012