

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02631

FILED  
Feb 04, 2003  
Secretary of State

**Entity Name:** H. LEE MOFFITT CANCER CENTER AND RESEARCH INSTITUTE, INC.

**Current Principal Place of Business:**

12902 MAGNOLIA DR  
TAMPA, FL 336129497 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JOHN A KOLOSKY EVP  
12902 MAGNOLIA DRIVE  
TAMPA, FL 336129416 US

**New Mailing Address:**

**FEI Number:** 59-2451713

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DE LA PARTE, L. DAVID  
101 E. KENNEDY BLVD., STE. 3400  
TAMPA, FL 33602 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: TD ( ) Delete  
Name: MOFFITT, H. LEE HON.  
Address: 4230 S MACDILL AVE., STE. J  
City-St-Zip: TAMPA, FL 33611

Title: SD ( ) Delete  
Name: BUCHANAN, DONALD D  
Address: 610 W. BAY ST.  
City-St-Zip: TAMPA, FL 33606

Title: D ( ) Delete  
Name: COUCH, THEODORE  
Address: 1717 E FOWLER AVE  
City-St-Zip: TAMPA, FL 33612

Title: CD ( ) Delete  
Name: MACK, CONNIE HON.  
Address: 2300 N STREET, NW  
City-St-Zip: WASHINGTON, DC 20037

Title: D ( ) Delete  
Name: ADAMS, TIMOTHY J  
Address: ONE NORTH DALE MABRY  
City-St-Zip: TAMPA, FL 33609

Title: D ( ) Delete  
Name: IVEY, JAMES W  
Address: 4816CULBREATH ISLES ROAD  
City-St-Zip: TAMPA, FL 33629

**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: ( ) 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: DONALD D BUCHANAN

SD

02/04/2003

Electronic Signature of Signing Officer or Director

Date

S. DAVID STAMPS, PH.D.  
4202 E. FOWLER AVENUE  
TAMPA, FL 33620

JACK SPANGLER  
2310 S. HESPERIDES  
TAMPA, FL 33629

RHEA F. LAW  
501 E. KENNEDY BLVD., SUITE 1700  
TAMPA, FL 33602

HON. JEFFREY HUENINK  
2758 HERON PLACE  
CLEARWATER, FL 33762

BETH A. HOUGHTON  
3637 - 4TH STREET NORTH, SUITE 395  
ST. PETERSBURG, FL 33704

MONSIGNOR LAURENCE HIGGINS  
5225 N. HIMES  
TAMPA, FL 33622

HON. JOHN GRANT  
10025 ORANGE GROVE DRIVE  
TAMPA, FL 33622

JUDY L. GENSHAFT, PH.D.  
4202 E. FOWLER AVE., ADM 241  
TAMPA, FL 33620

ROBERT M. DAUGHERTY, PH.D., M.D.  
12901 BRUCE B. DOWNS BLVD.  
TAMPA, FL 33612-4799

ROBERT A. CLARK, M.D.  
12902 MAGNOLIA DRIVE  
TAMPA, FL 33612

CARL P. CARLUCCI, PH.D.  
4202 EAST FOWLER AVE., ADM 200  
TAMPA, FL 33620-5950

RICHARD A. BEARD, III  
100 NORTH TAMPA ST., SUITE 3175  
TAMPA, FL 33602