

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003027

FILED
Apr 28, 2009
Secretary of State

Entity Name: JOHNNIE B. BYRD, SR. ALZHEIMER'S CENTER AND RESEARCH INSTITUTE, INC.

Current Principal Place of Business:

4001 EAST FLETCHER AVENUE
TAMPA, FL 33613 US

New Principal Place of Business:

Current Mailing Address:

4001 EAST FLETCHER AVENUE
TAMPA, FL 33613 US

New Mailing Address:

FEI Number: 72-1556975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUSTAFSON, ZOE
4001 EAST FLETCHER AVENUE
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: VC () Delete
Name: HARRIS, KATHY C ESQ
Address: 601 EAST KENNEDY BOULEVARD, 16TH FLOOR
City-St-Zip: TAMPA, FL 33602 US

Title: T () Delete
Name: TOMASINO, SHERRILL
Address: 12301 N 52 STREET
City-St-Zip: TEMPLE TERRACE, FL 33617 US

Title: C () Delete
Name: VERGARA, PAMELA PH.D
Address: 5075 WHITE ROAD
City-St-Zip: SPRING LAKE, FL 34602 US

Title: S () Delete
Name: ROACH, TERRI JO ESQ
Address: 13846 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: D () Delete
Name: CONKLIN, THOMAS R ESQ
Address: 2 NORTH TAMiami TRAIL, SUITE 506
City-St-Zip: SARASOTA, FL 34236 US

Title: PCEO () Delete
Name: KLASKO, STEPHEN M.D.
Address: 13201 BRUCE B. DOWNS BLVD.
City-St-Zip: TAMPA, FL 33612 US

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 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: STEPHEN KLASKO, M.D.

CEO

04/28/2009

Electronic Signature of Signing Officer or Director

Date

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ANNUAL REPORT

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AND RESEARCH INSTITUTE, INC.

10. OFFICERS AND DIRECTORS (continued)

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
in 10 (continued)

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete Johnnie B. Byrd, Jr., Esq. Byrd-Stitzel, P.A. 206 North Collins Street Plant City, FL 33563	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete Judy L. Genshaft, Ph.D. University of South Florida 4202 East Fowler Avenue, ADM 241 Tampa, FL 33620-6150	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete Wayne K. Goodman, M.D. Department of Psychiatry McKnight Brain Institute 100 South Newell Drive Gainesville, FL 32610-0236	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete Mr. Lindsay M. Harrington 4001 E. Fletcher Avenue Tampa, FL 33613	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete Mr. John Hehn, Jr. Florida Presbyterian Homes, Inc. 16 Lake Hunter Drive Lakeland, FL 33803	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

2008 NOT FOR PROFIT CORPORATION
SECOND AMENDED ANNUAL REPORT

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AND RESEARCH INSTITUTE, INC.

10. OFFICERS AND DIRECTORS (continued)

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
in 10 (continued)

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete Sheila M. McDevitt 16750 Gulf Blvd. #215 N. Reddington Beach, FL 33708	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition Ms. Ann Duncan Vertical Integration, Inc. 600 N. Westshore Blvd., Ste 200 Tampa, FL 33609
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete Allen Mortham 4001 E. Fletcher Ave. Tampa, FL 33613	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input type="checkbox"/> Addition Angela Hill, Pharm D. 3453 Kaylee Court Tallahassee, FL 32317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete Ms. Gloria T. Smith Florida Gulf Coast Chapter 9635 US Hwy 19N, Suite B Pinellas Park, FL 33782	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete D. Howard Stitzel, III, Esq. Byrd-Stitzel, P.A. 206 North Collins Street Plant City, FL 33563	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete Ruth Tappen, Ed.D., R.N., F.A.A.N. Building AZ 79, 777 Glades Rd Boca Raton, FL 33431-0991	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition