

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03849

FILED
Mar 16, 2011
Secretary of State

Entity Name: UNITED CEREBRAL PALSY OF TAMPA BAY, INC.

Current Principal Place of Business:

2215 E HENRY AVENUE
TAMPA, FL 33610 US

New Principal Place of Business:

Current Mailing Address:

2215 E HENRY AVENUE
TAMPA, FL 33610 US

New Mailing Address:

FEI Number: 59-0714818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, LAURA
2215 E HENRY AVENUE
TAMPA, FL 33610 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: PRES
Name: COHEN, ANDREW
Address: 2215 E HENRY AVE
City-St-Zip: TAMPA, FL 33610

Title: VP
Name: TAKAGISHI, JENNIFER DR
Address: 215 E HENRY AVE
City-St-Zip: TAMPA, FL 33610

Title: SEC
Name: TAKAGISHI, JENNIFER DR
Address: 2215 E HENRY AVE
City-St-Zip: TAMPA, FL 33610

Title: TRES
Name: O'BRIEN, KIM
Address: 2215 E HENRY AVE
City-St-Zip: TAMPA, FL 33610

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: LAURA WHITE

ED

03/16/2011

Electronic Signature of Signing Officer or Director

Date