2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# N04000000759

Entity Name: TAMPA BAY'S CHILD, INC.

Current Principal Place of Business:

801 SOUTH NEWPORT AVENUE
TAMPA, FL 33606 US

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 2134
TAMPA, FL 33601 US

New Mailing Address:

FEI Number: 55-0863249 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WAGNER, ALAN F
601 BAYSHORE BOULEVARD
SUITE 910
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:	DIR.	( ) Delete
Name:	WAGNER, DEBORAH H	
Address:	801 SOUTH NEWPORT AVENUE	
City-St-Zip:	TAMPA, FL 33606 US	
Title:	DIR.	( ) Delete
Name:	HARDIN, DIANNE L	
Address:	701 BUNGALOW TERRACE	
City-St-Zip:	TAMPA, FL 33606 US	
Title:	DIR.	( ) Delete
Name:	COOPER, DENISE	
Address:	1786 HIGHLANDS VIEW	
City-St-Zip:	SMYRNA, GA 30082 US	
Title:	DIR.	( ) Delete
Name:	WOOD, PAT	
Address:	852 SOUTH NEWPORT AVENUE	
City-St-Zip:	TAMPA, FL 33606 US	
Title:	DIR.	( ) Delete
Name:	FRANCIS, HILDREN	
Address:	705 SOUTH NEWPORT AVENUE	
City-St-Zip:	TAMPA, FL 33606	

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:	

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: DEBORAH H. WAGNER PRES 01/15/2009

Electronic Signature of Signing Officer or Director — Date