

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N13702

FILED  
Apr 28, 2003  
Secretary of State

Entity Name: HILLSBOROUGH COUNTY CENTER OF EXCELLENCE, INC.

## Current Principal Place of Business:

7406 N. DIXON  
TAMPA, FL 33604 US

## New Principal Place of Business:

1000 INDIA STREET  
TAMPA, FL 33602 US

## Current Mailing Address:

P.O BOX 291447  
TEMPLE TERRANCE, FL 33687 US

## New Mailing Address:

FEI Number: 59-2648954      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GILMORE, RICARDO L  
101 E. KENNEDY BOULEVARD  
SUITE 3200  
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: VD ( ) Delete  
Name: CARLEY, SYLVIA M,  
Address: 7406 N. DIXON  
City-St-Zip: TAMPA, FL

Title: D ( ) Delete  
Name: RIGGS, CARL  
Address: USF/CEMSCT-SCA 464  
City-St-Zip: TAMPA, FL

Title: PD ( ) Delete  
Name: HORTON, SAM,  
Address: 8003 JACKSON SPR. RD.  
City-St-Zip: TAMPA, FL

Title: D ( ) Delete  
Name: LOWRY, LEON A,  
Address: 900 DELWARE AVENUE NORTH  
City-St-Zip: TAMPA, FL

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: CARLEY, SYLVIA M PHD  
Address: 7021 53RD STREET  
City-St-Zip: TAMPA, FL 33617 US

Title: D (X) Change ( ) Addition  
Name: LEEKS, MICHAEL D MR  
Address: P O BOX 23831  
City-St-Zip: TAMPA, FL 33623 US

Title: PD (X) Change ( ) Addition  
Name: HORTON, SAM PHD  
Address: 8003 JACKSON SPR. RD.  
City-St-Zip: TAMPA, FL 33615 US

Title: D (X) Change ( ) Addition  
Name: LOWRY, LEON A REV  
Address: 900 DELWARE AVENUE NORTH  
City-St-Zip: TAMPA, FL 33607 US

Title: D ( ) Change (X) Addition  
Name: BANKS, BARTHOLOMEW REV  
Address: 3420 N. 22ND STREET  
City-St-Zip: TAMPA, FL 33605 US

Title: D ( ) Change (X) Addition  
Name: DANAHER, SHARON MRS  
Address: 13520 CLUBSIDE DRIVE  
City-St-Zip: TAMPA, FL 33624 US

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: SAM HORTON

PD

04/28/2003

Electronic Signature of Signing Officer or Director

Date

RICHARD BRISCOE, PH.D., DIRECTOR  
4103 SUMMERDALE DRIVE  
TAMPA, FL 33624

DORIS SCOTT, DIRECTOR  
3604 RIVER GROVE DRIVE  
TAMPA FL 33610