

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N92000000350 ()
1. Corporation Name

ST. JOSEPH'S COMMUNITY CARE, INC.

FILED
May 01 1996 8:00 am
Secretary of State

Principal Place of Business Mailing Address
c/o St. Joseph's Hospital Legal Services Dept.
3003 W. Dr. M.L.K., Jr., Blvd. 3003 W. Dr. M.L.K., Jr. Blvd.
Tampa, FL 33607 Tampa, FL 33607

US US
2. Principal Place of Business 2a. Mailing Address
1 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
2 City & State 27 City & State
3 Zip 28 Zip
4 Country 29 Country

3. Date Incorporated or Qualified 11/18/92 3a. Date of Last Report 05/01/95
4. FEI Number 59-3152608 Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

BIEBEL, JOHN
3003 W MARTIN LUTHER KING JR BLVD
TAMPA FL 33607

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0603, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE P/D ☐ DELETE
NAME Biebel, John
STREET ADDRESS 3003 W. Dr. M.L. King Jr., Blvd.
CITY-ST-ZIP Tampa, FL 33607
TITLE EMP ☐ DELETE
NAME Scott, Charles F.
STREET ADDRESS 3003 W. Dr. M.L. King Jr., Blvd.
CITY-ST-ZIP Tampa, FL 33607
TITLE EMP/D ☐ DELETE
NAME Mallah, Isaac
STREET ADDRESS 3003 W. Dr. M.L. King Jr., Blvd.
CITY-ST-ZIP Tampa, FL 33607
TITLE S/D ☐ DELETE
NAME Pitisci, Gilbert
STREET ADDRESS 3003 W. Dr. Martin Luther King Jr., Blvd.
CITY-ST-ZIP Tampa, FL 33607
TITLE T/D ☐ DELETE
NAME Chaw, Gary W.
STREET ADDRESS 3003 W. Dr. Martin Luther King Jr., Blvd.
CITY-ST-ZIP Tampa, FL 33607
TITLE EMP ☐ DELETE
NAME Shumaker, Revonda L.
STREET ADDRESS 1200 7th Avenue North
CITY-ST-ZIP St. Petersburg, FL 33705

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE Asst. Sec. ☐ Change ☐ Addition
12 NAME Jackson, Sandra
13 STREET ADDRESS 3003 W. Dr. M.L.K., Jr. Blvd.
14 CITY-ST-ZIP Tampa, FL 33607
21 TITLE Asst. Sec. ☐ Change ☐ Addition
22 NAME Ourd, Gilian
23 STREET ADDRESS 1200 7th Avenue North
24 CITY-ST-ZIP St. Petersburg, FL 33705
31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP
41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP
51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP
61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN BIEBEL

4/30/96

Date

(813) 870-4240

Daytime Phone #

CS 5/1/96