

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002296

FILED
Apr 30, 2012
Secretary of State

Entity Name: MINORITY HEALTH COALITION OF PINELLAS, INC.

Current Principal Place of Business:

601 7TH ST SOUTH
DR BRYANT'S OFFICE
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

601 7TH ST SOUTH
DR BRYANT'S OFFICE
ST. PETERSBURG, FL 33701 US

New Mailing Address:

FEI Number: 59-3151453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRYANT, KENNETH R
601 7TH ST SOUTH
DR. BRYANT'S OFFICE
ST. PETERSBURG, FL 33701 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: PD
Name: BRYANT, KENNETH R. M.D.
Address: 601 7TH ST. S.
City-St-Zip: ST PETERSBURG, FL 33701

Title: VPD
Name: CHARLIE, COLQUITT PHARMD
Address: 1820 SERPENTINE DRIVE SOUTH
City-St-Zip: ST PETERSBURG, FL 33712

Title: SD
Name: MONTES, CASSANDRA
Address: 761 ALAMANDA WAY SOUTH
City-St-Zip: ST PETERSBURG, FL 33705

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: KENNETH R. BRYANT, M.D.

PD

04/30/2012

Electronic Signature of Signing Officer or Director

_____ Date