

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006033

FILED
Apr 23, 2008
Secretary of State

Entity Name: TAMPA BAY CHAPTER, THE AMERICAN ASSOCIATION OF NURSE ATTORNEYS, INC.

Current Principal Place of Business:

2018 E 4TH AVE
TAMPA, FL 336055216 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 172356
TAMPA, FL 336722356 US

New Mailing Address:

FEI Number: 59-3281657

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIKOS, CYNTHIA A
2018 E 4TH AVE
TAMPA, FL 336055216 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: P () Delete
Name: MURRAY, KIMBERLY RN JD
Address: 411 S WESTLAND AVE UNIT 4
City-St-Zip: TAMPA, FL 33606 US

Title: VP () Delete
Name: CHIARELLI, MEREDITH RN CLNC
Address: 2519 MCMULLEN BOOTH RD STE 510-268
City-St-Zip: CLEARWATER, FL 33761 US

Title: S () Delete
Name: MONTAGNO, JOAN RN MPH
Address: 800 E TWIGGS ST RM 480D
City-St-Zip: TAMPA, FL 33602 US

Title: T () Delete
Name: COLLINS, SUZANNE E RN MPH
Address: 401 W KENNEDY BLVD BOX 10F
City-St-Zip: TAMPA, FL 33606 US

Title: D () Delete
Name: MCAULIFFE, DANEIL M ESQ
Address: 28163 US HWY 19 N, STE 200
City-St-Zip: CLEARWATER, FL 33761 US

Title: D () Delete
Name: SUAREZ, SUZANNE H ESQ
Address: PO BOX 13215
City-St-Zip: TAMPA, FL 336813215 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KAREN, DEAL ESQ
Address: 1801 N HIGHLAND AVE
City-St-Zip: TAMPA, FL 33602 US

Title: VP (X) Change () Addition
Name: LANIER, M. ELIZABETH RN JD
Address: PO BOX 342263
City-St-Zip: TAMPA, FL 336942263 US

Title: S (X) Change () Addition
Name: CALHOUN, PATRICIA S ESQ
Address: 401 E JACKSON ST STE 2500
City-St-Zip: TAMPA, FL 33602 US

Title: T (X) Change () Addition
Name: COLLINS, SUZANNE E RN MPH
Address: 401 W KENNEDY BLVD BOX 10F
City-St-Zip: TAMPA, FL 336061450 US

Title: D (X) Change () Addition
Name: MIKOS, CYNTHIA A ESQ
Address: 2018 E 4TH AVE
City-St-Zip: TAMPA, FL 336055216 US

Title: D (X) Change () Addition
Name: MCGIRK, CINDY RN MBA
Address: 12902 MAGNOLIA DR
City-St-Zip: TAMPA, FL 336129497 US

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: CYNTHIA A MIKOS

DIR

04/23/2008

Electronic Signature of Signing Officer or Director

Date