## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9400006033

Mar 23, 2009 Secretary of State

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

**Current Principal Place of Business:** New Principal Place of Business:

2018 E 4TH AVE 202 S ROME AVE

TAMPA, FL 336055216 US STE 100

TAMPA, FL 336061854 US

**Current Mailing Address:** New Mailing Address:

202 S ROME AVE PO BOX 172356

TAMPA, FL 336722356 US STE 100

TAMPA, FL 336061854 US

FEI Number: 59-3281657 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MIKOS, CYNTHIA A COLLINS, SUZANNE E RN MPH 2018 E 4TH AVE UNIV OF TAMPA DEPT OF NURSING TAMPA, FL 336055216 US 401 W KENNEDY BLVD BOX 10-F

TAMPA, FL 336061450 US

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: SUZANNE EDGETT COLLINS RN MPH JD PHD 03/23/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete KAREN, DEAL ESQ LANIER, M ELIZABETH RN JD Name: Name: 1801 N HIGHLAND AVE Address: 8270 WOODLAND CTR BLVD #141 Address:

City-St-Zip: TAMPA, FL 33602 US City-St-Zip: TAMPA, FL 33614 US

Title: () Delete Title: (X) Change ( ) Addition

LANIER, M. ELIZABETH RN JD Name: MCGIRK, CINDY RN MBA Name: Address: PO BOX 342263 Address: 12901 MAGNOLIA DR City-St-Zip: TAMPA, FL 336942263 US City-St-Zip: TAMPA, FL 33612 US

Title: () Delete Title: (X) Change ( ) Addition CALHOUN, PATRICIA S ESQ. Name: MIKOS, CYNTHIA A ESQ Name:

401 E JACKSON ST STE 2500 202 S ROME AVE STE 100 Address: Address: City-St-Zip: TAMPA, FL 33602 US City-St-Zip: TAMPA, FL 336061854 US

Title: ( ) Delete Title: () Change () Addition

Name: COLLINS, SUZANNE E RN MPH Name: 401 W KENNEDY BLVD BOX 10F Address: Address: City-St-Zip: TAMPA, FL 336061450 US City-St-Zip:

Title: ( ) Delete Title: (X) Change ( ) Addition

MIKOS, CYNTHIA A ESQ USSELMAN, DEBORAH Name: Name: 2018 E 4TH AVE 1200 7TH AVE N Address: Address:

TAMPA, FL 336055216 US ST PETERSBURG, FL 337051300 US City-St-Zip: City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

MCGIRK, CINDY RN MBA GAINEY, MELISSA RN JD Name: Name: Address: 12902 MAGNOLIA DR Address: 4401 N HIMES AVE TAMPA, FL 336129497 US TAMPA, FL 33614 US City-St-Zip: 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: SUZANNE EDGETT COLLINS RN MPH Т 03/23/2009