

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004513

FILED  
Jul 08, 2008  
Secretary of State

Entity Name: WILLA CARSON HEALTH RESOURCE CENTER, INC.

**Current Principal Place of Business:**

1108 N. MARTIN LUTHER KING AVE  
CLEARWATER, FL 33755

**New Principal Place of Business:**

**Current Mailing Address:**

1108 N. MARTIN LUTHER KING AVE  
CLEARWATER, FL 33755

**New Mailing Address:**

FEI Number: 65-0743078      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ABDUR-RAHIM, MUHAMMAD  
1028 MADISON AVE  
CLEARWATER, FL 33755      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: VPD ( ) Delete  
Name: DEAN, GREGORY  
Address: 1013 LOTUS PATH  
City-St-Zip: CLEARWATER, FL 33756

Title: PD ( ) Delete  
Name: ABDUR-RAHIM, MUHAMMAD  
Address: 1028 N. MADISON AVE.  
City-St-Zip: CLEARWATER, FL 33755

Title: TD ( ) Delete  
Name: AYER, JAMES  
Address: 7920 JAYWOOD ROAD  
City-St-Zip: LARGO, FL 33777

Title: D ( ) Delete  
Name: SHERMAN, WILLIAM F  
Address: 1014 PENNSYLVANIA AVE  
City-St-Zip: CLEARWATER, FL 33755

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

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

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

Title: DIR (X) Change ( ) Addition  
Name: TYRELL, ANNIE  
Address: 2574 59TH AVENUE SOUTH  
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: BOD (X) Change ( ) Addition  
Name: BALLOGG, MILES  
Address: 380 PARK BLVD, SUITE 300  
City-St-Zip: CLEARWATER, FL 33759

Title: BOD (X) Change ( ) Addition  
Name: SHERMAN, WILLIAM F  
Address: 1014 PENNSYLVANIA AVE  
City-St-Zip: CLEARWATER, FL 33755

Title: SD ( ) Change (X) Addition  
Name: FLANERY, MICHAEL  
Address: 1836 VENETIAN POINT DRIVE  
City-St-Zip: CLEARWATER, FL 33755

Title: BOD ( ) Change (X) Addition  
Name: SHOWERS, GREGORY  
Address: 133 N. FT HARRISON AVENUE  
City-St-Zip: CLEARWATER, FL 33755

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: ANNIE TYRELL

DIR

07/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date