FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # N9700005028

TAMPA BAY HEALTH SERVICES, INC.

Principal Place of Busine
7050 GALL BLVD
ZEPHYRHILLS FL 33541

2. Principal Place of Business

Mailing Address

7050 GALL BLVD ZEPHYRHILLS FL 33541

2a. Mailing Address

26

FILED Mar 05, 1999 8:00 am § Secretary of State

173534 - 90054 - 21 4

Applied For

03-05-1999 90054 021 ***150.00

3. Date incorporated or Qualifed

08/31/1997

4. FEI Number

Second S	Suite, Apt. #, etc.		Suite, Apt. #, etc.		-	4. FEI Number	Apı	olied For
City & State City & State City & State City & State City & State City & State St. Certificate of Status Desired St. 75 Additional fee Required St. 75 Additional fee Repair St. 75 Additio	¬ ''		27	¬		59-2118790	Not	Applicable
TRIMBLE, TAMARA L TRIMBLE, TAMARA L TITIN ORLANDO AVE WINTER PARK FL 32789 10. Name and Address of Current Registered Agent 82 Street Address (P.O. Box Number is Not Acceptable) 11. Fursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named comploration submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named comploration submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, the above-named comploration submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, the above-named comploration should represent agent. I am familiar with, and accept the obligations of, Section 617,6503, Florida Statutes, the above-named comploration should represent agent. I am familiar with, and accept the obligations of, Section 617,6503, Florida Statutes, the above-named comploration should represent agent. I am familiar with, and accept the obligations of, Section 617,6503, Florida Statutes, the above-named comploration should represent agent. I am familiar with, and accept the obligations of, Section 617,6503, Florida Statutes, the above-named comploration should represent agent. I am familiar with, and accept the obligations of, Section 617,6503, Florida Statutes, the above-named comploration should represent agent. I mentally accept the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named comploration should represent agent. I mentally accept the purpose of changing its registered agent, or both, in the State of the Acceptance of the purpose of changing its registered agent. In the purpose of changing its registered agent, or both, in the State Acceptance of the purpose of changing its registered agent. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 13. STATE ACCEPTANCE						5 0 17 1 10 1 Duiled D	\$8.75 A	dditional
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8. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Street Address of New Registered Agent 13. Name 14. Name and Address of New Registered Agent 15. Name 16. Name and Address of New Registered Agent 17. Fursuant 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 agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent, and a state of Florida, Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent, and a state of Florida, Such change was authorized by the corporation's board of directors, thereby accept the appointment as registered agent, and the internation of the purpose of changing its registered agent, and the internation of the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, the above named origination agent				Country		6. Election Campaign Financing	\$5.00	May Be
9. Name and Address of Current Registered Agent TRIMBLE, TAMARA L 1111 N ORLANDO AVE WINTER PARK FL 32789 83 84 City 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 agent. I am Immiliar with, and eacept the obligations of 57,0509, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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 Immiliar with, and eacept the obligation of 57,0509, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. TITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGE				ה	Trust Fund Contribution Add		Added to	o Fees
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Signature, typed or private name of registrated agent and title of Registrated. NOTE: Registrated Agent at speakure required when remaining UAIE	-	m fairmar with, and accept the obligat	dona or, escuor or 1.0000, i forde	o clataroo.				
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	14 I berebut	portify that the information supplied with	th this filing does not qualify for th			Section 119.07(3)(i). Florida Statutes. I furti	ner certify that the i	nformation

indicated on this arithm report of supplemental annual ann

SIGNATURE:

407-975-1413