

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005312

FILED
Jan 10, 2007
Secretary of State

Entity Name: SOMEBODY CARES TAMPA BAY, INC.

Current Principal Place of Business:

2140 RANGE ROAD, UNIT A
CLEARWATER, FL 33765

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 4486
CLEARWATER, FL 33758

New Mailing Address:

FEI Number: 59-3470531 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WELCH, THOMAS
4885 PARSON BROWN LANE
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

LADD, VANESSA L
9000 64TH WAY
PINELLAS PARK, FL 33782 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: VANESSA L LADD

01/10/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BERNARD, DANIEL
Address: 2069 PLATEAU RD
City-St-Zip: CLEARWATER, FL 33755

Title: C () Delete
Name: WOZNIAK, VINCENT
Address: 2005 GREEN BRIER BLVD. UNIT 15
City-St-Zip: CLEARWATER, FL 33763

Title: D () Delete
Name: AZZARELLI, BART
Address: 6320 E 112TH AVE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D () Delete
Name: WELCH, THOMAS
Address: 4885 PARSON BROWN LANE
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: JAEGER, ROY J
Address: 2825 FAIRWAY VIEW DR
City-St-Zip: VALRICO, FL 33594

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: ALVAREZ, JESSICA
Address: 12964 HYBISCUS AVE
City-St-Zip: SEMINOLE, FL 33776

Title: D (X) Change () Addition
Name: WOLF, THOMAS G
Address: 709 GUI SANDO DE AVILA
City-St-Zip: TAMPA, FL 33613

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

Title: D () Change (X) Addition
Name: ALTMAN, RONALD
Address: 4811 CULBREATH ISLES WAY
City-St-Zip: TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL BERNARD

PD

01/10/2007

Electronic Signature of Signing Officer or Director

Date