

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005312

FILED
Jan 12, 2012
Secretary of State

Entity Name: SOMEBODY CARES TAMPA BAY, INC.

Current Principal Place of Business:

21903 US HWY 19 NORTH
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:

BERNARD, KATHYRN E
2069 PLATEAU RD
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: PD
Name: BERNARD, DANIEL
Address: 2069 PLATEAU RD
City-St-Zip: CLEARWATER, FL 33755

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

Title: D
Name: GOMEZ, MAYRA
Address: 15104 ELMCREST ST
City-St-Zip: ODESSA, FL 33556

Title: D
Name: SCOTT, TARA
Address: 8950 9TH STREET, NO. STE. 204
City-St-Zip: ST. PETERSBURG, FL 33702

Title: D
Name: OGUNDIPE, OLUKAYODE
Address: 10919 CORY LAKE DRIVE
City-St-Zip: TAMPA, FL 33607

Title: D
Name: BERNARD, KATHRYN E
Address: 2069 PLATEAU ROAD
City-St-Zip: CLEARWATER, FL 33755

I hereby 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 all other like empowered.

SIGNATURE: DANIEL BERNARD

PRES

01/12/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date