2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 12, 2002 8:00 am
Secretary of State

05-03-2002 90156 025 ****61.25

DOCUMENT # N99000005363

1. Entity Name

TAMPA BAY ASSOCIATION FOR WOMEN PSYCHOTHERAPISTS INC.

Principal Place of Business	Mailing Address
C/O CHRISTINA BELLAMY, LAMC 2805 W. BUSCH BLVD-STE 113 TAMPA FL 33618	C/O CHRISTINA BELLAMY, LAMC 2805 W. BUSCH BLVD-STE 113 TAMPA FL 33618

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 37-7463825 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BREWER, SUE A 1700 PARK ST N #109 SAINT PETERSBURG FL 33710	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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 Sue A. Brewer 4/17/02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD ☒ Delete	PD ☒ Change ☐ Addition	
NAME	KIRTIKAN, SUSHAMA	Mullins, Susan	
STREET ADDRESS	4621 CLOVERLAWN DR	207 Verne St	
CITY-ST-ZIP	TAMPA FL 33624	Tampa FL 33606	
TITLE	PED ☒ Delete	PED ☒ Change ☐ Addition	
NAME	MULLINS, SUSAN	~~Susan~~ Whitney, Susan	
STREET ADDRESS	207 VERNE ST	1502 W. Busch Blvd Suite F	
CITY-ST-ZIP	TAMPA FL 33606	Tampa FL 33612	
TITLE	IPPD ☒ Delete	IPPD ☒ Change ☐ Addition	
NAME	BELLAMY, CHRISTINA	Kirtikar, Sushama	
STREET ADDRESS	2805 W. BUSCH BLVD #113	4621 Cloverlawn Dr	
CITY-ST-ZIP	TAMPA FL 33618	Tampa FL 33624	
TITLE	SD ☒ Delete	SD ☐ Change ☒ Addition	
NAME	WHITNEY, SUSAN	Mulloy, Jean	
STREET ADDRESS	1502 W. BUSCH BLVD SUITE F	18121 Sugar Brooke Dr	
CITY-ST-ZIP	TAMPA FL 33612	Tampa FL 33647	
TITLE	TD ☐ Delete	TD ☒ Change ☐ Addition	
NAME	BREWER, SUE	Brewer, Sue	
STREET ADDRESS	1700 PARK ST N #108	1700 Park St N #109	
CITY-ST-ZIP	SAINT PETERSBURG FL 33710	St. Petersburg FL 33710	
TITLE	☐ Delete	☐ Change ☐ Addition	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Sue A. Brewer QUIFSUE A. Brewer 4/17/02 727-347-3680

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #