

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 705694

Entity Name: MENTAL HEALTH AMERICA OF GREATER TAMPA BAY, INC.

Current Principal Place of Business:

C/O USF DEPARTMENT OF PSYCHIATRY
12901 BRUCE B. DOWNS BLVD., MDC 102
TAMPA, FL 33612-4742

Current Mailing Address:

C/O USF DEPARTMENT OF PSYCHIATRY
12901 BRUCE B. DOWNS BLVD., MDC 102
TAMPA, FL 33612-4742

FEI Number: 59-0859886

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BARNETT, SCOTT F
140 DANUBE AVENUE
#3
TAMPA, FL 33606 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PSD
Name BARNETT, SCOTT F
Address 140 DANUBE AVENUE, #3
City-State-Zip: TAMPA FL 33606

Title D
Name SHERN, DAVID L PHD
Address 11009 THERESA ARBOR DRIVE
City-State-Zip: TEMPLE TERRACE FL 33617

Title D
Name WECKER, LYNN PH.D.
Address C/O 12901 BRUCE B. DOWNS BLVD.,
MDC 102
City-State-Zip: TAMPA FL 33612-4742

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: DAVID L. SHERN

DIRECTOR

05/02/2014

Electronic Signature of Signing Officer/Director Detail

Date