

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767935

Entity Name: HILLSBOROUGH COUNTY PEDIATRIC SOCIETY, INC.

Current Principal Place of Business:

4446 EAST FLETCHER AVE. SUITE A
TAMPA, FL 33613

Current Mailing Address:

4446 EAST FLETCHER AVE. SUITE A
TAMPA, FL 33613 US

FEI Number: 59-2283264

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAHN, WILLIAM E.
201 E. KENNEDY BLVD, SUITE 1000
TAMPA, FL 33602 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 D, PRESIDENT
Name SOLIMAR, SALUD
Address 1919 WEST SWANN AVE
2ND FLOOR
City-State-Zip: TAMPA FL 33606

Title D, VP
Name PESCE, JENNIFER
Address 1919 WEST SWANN AVE..
2ND FLOOR
City-State-Zip: TAMPA FL 33606

Title .D, CHAIRMAN
Name SPOTO-CANNONS, ANTOINETTE
Address 9024 CLIFF LAKE LANE
City-State-Zip: TAMPA FL 33614

Title TREASURER, DIRECTOR,
SECRETARY
Name MITCHELL, JOSHUA
Address 2814 WEST VIRGINIA
City-State-Zip: TAMPA FL 33607

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: SOLIMAR SALUD

PRESIDENT

02/08/2019

Electronic Signature of Signing Officer/Director Detail

Date