

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000008917

Entity Name: BSSM TAMPA BAY INC.**Current Principal Place of Business:**2640 CYPRESS RIDGE BLVD
SUITE 101
WESLEY CHAPEL, FL 33544**Current Mailing Address:**2640 CYPRESS RIDGE BLVD
SUITE 101
WESLEY CHAPEL, FL 33544 US**FEI Number:** 45-3358143**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEWIS, APRIL
2640 CYPRESS RIDGE BLVD
SUITE 101
WESLEY CHAPEL, FL 33544 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:** APRIL M. LEWIS

01/28/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name LEWIS, APRIL
Address 26954 JUNIPER BAY DR
City-State-Zip: WESLEY CHAPEL FL 33544

Title D
Name MORGAN, JASON S
Address 25222 CONESTOGA DR
City-State-Zip: LAND O LAKES FL 33469

Title D
Name SWETS, SHAWN
Address 24815 LAUREL RIDGE DR.
City-State-Zip: LUTZ FL 33549

Title DIRECTOR
Name MORGAN, STEVEN
Address 25222 CONESTOGA DR
City-State-Zip: LAND O LAKES FL 33469

Title D
Name HUNGLER, SHERI
Address 2640 CYPRESS RIDGE BLVD
SUITE 101
City-State-Zip: WESLEY CHAPEL FL 33544

Title DIRECTOR
Name BLEVINS, JEANIE
Address 2640 CYPRESS RIDGE BLVD
SUITE 101
City-State-Zip: WESLEY CHAPEL FL 33544

Title DIRECTOR
Name BARKLEY, IAN
Address 2951 FOREST FERN CT
City-State-Zip: LAND O LAKES FL 34638

Title DIRECTOR
Name BARKLEY, HEATHER
Address 2951 FOREST FERN CT
City-State-Zip: LAND O LAKES FL 34638

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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: APRIL LEWIS

PRESIDENT

01/28/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HERNANDEZ, MARILU
Address 10918 N. MARJORY AVE
City-State-Zip: TAMPA FL 33612

Title DIRECTOR
Name VANWERT, STEPHEN
Address 4305 W. BEACHWAY DR.
City-State-Zip: TAMPA FL 33609