## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000002296

Entity Name: MINORITY HEALTH COALITION OF PINELLAS, INC.

FILED Aug 03, 2016 Secretary of State CC8989247030

## **Current Principal Place of Business:**

1856 COFFEE POT BLVD. N. E. ST. PETERSBURG. FL 33704

## **Current Mailing Address:**

1856 COFFEE POT BLVD. N.E. ST. PETERSBURG, FL 33704 US

FEI Number: 59-3151453 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

BRYANT, KENNETH R 1856 COFFEE POT BLVD. N.E. ST. PETERSBURG, FL 33704 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 PD Title VPD

NameBRYANT, KENNETH R. M.D.NameCHARLIE, COLQUITT PHARMDAddress1856 COFFEE POT BLVD. N. E.Address1820 SERPENTINE DRIVE SOUTH

City-State-Zip: ST PETERSBURG FL 33704 City-State-Zip: ST PETERSBURG FL 33712

Title SD

Name MONTES, CASSANDRA

Address 761 ALAMANDA WAY SOUTH
City-State-Zip: ST PETERSBURG FL 33705

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: KENNETH R. BRYANT

**PRESIDENT** 

08/03/2016