

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005312

Entity Name: SOMEBODY CARES TAMPA BAY, INC.**Current Principal Place of Business:**21903 US HWY 19 NORTH
CLEARWATER, FL 33765**Current Mailing Address:**P.O. BOX 4486
CLEARWATER, FL 33758**FEI Number:** 59-3470531**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BERNARD, KATHRYN E
1874 CASTLE WOODS DRIVE
CLEARWATER, FL 33759 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
Name	BERNARD, DANIEL
Address	1874 CASTLE WOODS DRIVE
City-State-Zip:	CLEARWATER FL 33759

Title	D
Name	OGUNDIPE, OLUKAYODE
Address	10919 CORY LAKE DRIVE
City-State-Zip:	TAMPA FL 33607

Title	DIRECTOR
Name	HELDRETH, JIM
Address	13811 MOONSTONE CANYON DRIVE
City-State-Zip:	RIVERVIEW FL 33579

Title	C
Name	WOZNIAK, VINCENT
Address	2005 GREEN BRIER BLVD. UNIT 15
City-State-Zip:	CLEARWATER FL 33763

Title	D
Name	BERNARD, KATHRYN E
Address	1874 CASTLE WOODS DRIVE
City-State-Zip:	CLEARWATER FL 33759

Title	DIRECTOR
Name	BOURLAND, JAMES
Address	378 WESTWINDS DRIVE
City-State-Zip:	PALM HARBOR FL 34683

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: KATHRYN E BERNARD

D

01/17/2017

Electronic Signature of Signing Officer/Director Detail

Date