

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90125 006 ****61.25

DOCUMENT # N34087

1. Entity Name

COALITION FOR THE HUNGRY AND HOMELESS OF BREVARD COUNTY, INC.

Principal Place of Business

Mailing Address

817 DIXON BLVD
 STE 12
 COCOA FL 32922
 US

P O BOX 2201
 COCOA FL 32923
 US

2. Principal Place of Business

817 Dixon Blvd.

3. Mailing Address

P.O. Box 2201

Suite, Apt. #, etc.

Suite 12

Suite, Apt. #, etc.

N/A

City & State

Cocoa, FL

City & State

Cocoa, FL

4. FEI Number

59-2981409

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

Zip

Country

Brevard

Zip

32923-2201

Country

Brevard

6. Name and Address of Current Registered Agent

CAPRILLA, RONALD
 8474 SYLVAN DRIVE
 W. MELBOURNE FL 32904

7. Name and Address of New Registered Agent

Name

DOUG WEINBURG

Street Address (P.O. Box Number is Not Acceptable)

3174 VILLAESPANA TRAIL

City

MELBOURNE

FL

Zip Code
 32935

8. 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 Doug Weinburg, President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/25/02

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **TD** ☐ Delete
 NAME **LEAR, DONALD**
 STREET ADDRESS **1024 PARK DRIVE, APT 4**
 CITY-ST-ZIP **INDIAN HARBOR BEACH FL 32937**

TITLE **PD** ☐ Delete
 NAME **CAPRILLA, RONALD**
 STREET ADDRESS **8474 SYLVAN DRIVE**
 CITY-ST-ZIP **W. MELBOURNE FL 32904**

TITLE **SD** ☐ Delete
 NAME **HOOPER, SMITTY**
 STREET ADDRESS **166 JUNE DRIVE**
 CITY-ST-ZIP **COCOA BEACH FL 32931**

TITLE **VD** ☐ Delete
 NAME **ABDILIAHWALI, AKHABIR**
 STREET ADDRESS **151 HOLLYWOOD BLVD**
 CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE **D** ☒ Delete
 NAME **RENBURG, DONNA**
 STREET ADDRESS **3270 SUNTREE BLVD**
 CITY-ST-ZIP **MELBOURNE FL 32940**

TITLE **D** ☐ Delete
 NAME **YESOWITCH, DEBORAH**
 STREET ADDRESS **1281 S. HICKORY STREET**
 CITY-ST-ZIP **MELBOURNE FL 32901**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
 NAME **GARVEY, NICK**
 STREET ADDRESS **817 DIXON BLVD., SUITE 12**
 CITY-ST-ZIP **COCOA, FL 32922-5808**

TITLE **VD** ☒ Change ☐ Addition
 NAME **CAPRILLA, RONALD**
 STREET ADDRESS **8474 SYLVAN DRIVE**
 CITY-ST-ZIP **W. MELBOURNE, FL 32904**

TITLE **D** ☐ Change ☒ Addition
 NAME **HINES, LISA A.**
 STREET ADDRESS **1251 SLEEPY HOLLOW LANE**
 CITY-ST-ZIP **ROCKLEDGE, FL 32955**

TITLE **D** ☒ Change ☐ Addition
 NAME **ABDILIAHWALI, AKHABIR**
 STREET ADDRESS **P.O. BOX 60368**
 CITY-ST-ZIP **Palm Bay, FL 32906-0368**

TITLE **D** ☐ Change ☒ Addition
 NAME **RAYSICH, MARK**
 STREET ADDRESS **1251 SLEEPY HOLLOW LANE**
 CITY-ST-ZIP **ROCKLEDGE, FL 32955**

TITLE **PD** ☐ Change ☒ Addition
 NAME **WEINBURG, DOUG**
 STREET ADDRESS **3174 VILLAESPANO TRAIL**
 CITY-ST-ZIP **MELBOURNE, FL 32935**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ginger Ferguson, Executive Director

1/23/2002

(321) 631-2549

CR2E037 (9/01)

Attachment
Doc# N134087
729595

Attachment

**Ginger Ferguson
Executive Director
410 Seahorse Lane
Cocoa, FL 32927**