

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N34087

FILED
Sep 29, 2014
Secretary of State

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

Current Principal Place of Business:

4087 U S HWY 1 SUITE 3
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

4087 U S HWY 1 SUITE 3
ROCKLEDGE, FL 32955 US

New Mailing Address:

FEI Number: 59-2981409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, ROCHELLE L DR.
4087 U.S. HWY 1 SUITE 3
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

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: ROB CRAMP

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: BUSSEN, BRIAN J
Address: 6405 GENOA TRAIL
City-St-Zip: MELBOURNE, FL 32940 US

Title: VP
Name: VENICE, JOHN
Address: 513 SEACREST AVE.
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: SECR
Name: GARRIGA, ELEANOR
Address: 660 PLANTATION ROAD
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TREA
Name: HOLLINGSWORTH, A T DR.
Address: 1256 BALLINTON DRIVE
City-St-Zip: MELBOURNE, FL 32940 US

Title: DIRE
Name: HOOPER, MARILYN
Address: 166 JUNE DRIVE
City-St-Zip: COCOA BEACH, FL 32931 US

Title: DIRE
Name: NOBLE, SANDY
Address: 2684 DIXIE COURT
City-St-Zip: COCOA, FL 32922

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: ROB CRAMP

RA

09/29/2014

Electronic Signature of Signing Officer or Director

Date