

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704778

Entity Name: FLORIDA COALITION FOR CHILDREN, INC.

Current Principal Place of Business:

317 EAST PARK AVE
TALLAHASSEE, FL 32301

Current Mailing Address:

317 EAST PARK AVE
TALLAHASSEE, FL 32301 US

FEI Number: 59-3435199

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLY, KURT
317 EAST PARK AVE
TALLAHASSEE, FL 32301 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: KURT KELLY

01/17/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIR EMERITUS
Name CAVASOS, LILA
Address 1421 BAYVIEW DR.
City-State-Zip: FT, LAUDERDALE FL 33304

Title TREASURER
Name JONES, MARK
Address 1221 W. LAKEVIEW AVE.
City-State-Zip: PENSACOLA FL 32501

Title PRESIDENT, CEO
Name KELLY, KURT
Address 317 EAST PARK AVE
City-State-Zip: TALLAHASSEE FL 32301

Title SECRETARY
Name KESIC, ANNA
Address 111 W. MAGNOLIA AVE.
City-State-Zip: LONGWOOD FL 32750

Title CHAIRMAN
Name COOPER, JOHN
Address 901 INDUSTRIAL DR
City-State-Zip: WILDWOOD FL 34785

Title VC
Name GREGORY, BRAD
Address 1715 LITHIA PINECREST RD.
City-State-Zip: BRANDON FL 33511

Title DIRECTOR
Name CARD, CHRIS
Address 9393 N. FLORIDA AVE.
SUITE 1100
City-State-Zip: TAMPA FL 33612

Title DIRECTOR
Name CASEL, GLEN
Address 4001 PELEE ST.
City-State-Zip: ORLANDO FL 32817

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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: KURT KELLY

PRESIDENT & CEO

01/17/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name KNAPP, MARIA
Address P.O. BOX 2000
City-State-Zip: BOYS RANCH FL 32064

Title DIRECTOR
Name REIN, LARRY
Address 1100 W. MCNAB RD.
City-State-Zip: FT. LAUDERDALE FL 33309

Title DIRECTOR
Name SCHOFIELD, DIANE
Address 6017 S.E. ROBINSON RD.
City-State-Zip: BELLEVIEW FL 34420

Title DIRECTOR
Name ZBYLUT, GREG
Address 975 OKLAHOMA ST.
City-State-Zip: OVIEDO FL 32765

Title DIRECTOR
Name MILLER, BOB
Address 1300 RIVERPLACE BLVD.
SUITE 700
City-State-Zip: JACKSONVILLE FL 32207

Title DIRECTOR
Name SALIM, NADEREH
Address 2232 ALTAMONT AVE.
City-State-Zip: FT. MYERS FL 33901

Title DIRECTOR
Name WYNTER, ELIZABETH
Address 1115 HILLSBORO MILE
City-State-Zip: HILLSBORO BEACH FL 33062