

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735186

Entity Name: FLORIDA COUNCIL FOR COMMUNITY MENTAL HEALTH, INC.**Current Principal Place of Business:**316 E PARK AVE
TALLAHASSEE, FL 32301**Current Mailing Address:**316 E PARK AVE
TALLAHASSEE, FL 32301 US**FEI Number:** 59-1657087**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROWN-WOOFER, MELANIE
316 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:** MELANIE BROWN-WOOFER

04/17/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GILLIS, RACHEL
Address 3686 US HIGHWAY 331 SOUTH
City-State-Zip: DEFUNIAK SPRINGS FL 32435

Title CHAIRMAN
Name RULIEN, THERESA
Address 5776 ST. AUGUSTINE ROAD
City-State-Zip: JACKSONVILL FL 32207-8046

Title DIRECTOR
Name AILES, EDWIN
Address 525 E. 15TH STREET
City-State-Zip: PANAMA CITY FL 32405

Title DIRECTOR
Name LABARTA, MARGARITA
Address 4300 SW 13TH STREET
City-State-Zip: GAINESVILLE FL 32608

Title DIRECTOR
Name DAIRE, BARBARA
Address 4024 CENTRAL AVENUE
City-State-Zip: ST. PETERSBURG FL 33733

Title PAST CHAIRMAN
Name ROMANO, JOHN
Address 4500 WEST MIDWAY ROAD
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name FERGUSON, DAVID
Address 10001 WEST OAKLAND PARK
BOULEVARD
SUITE 200
City-State-Zip: SUNRISE FL 33351

Title DIRECTOR
Name RONI, STEVEN
Address 4740 N STATE RD 7
BLDG C, SUITE 201
City-State-Zip: FT. LAUDERDALE FL 33319

Continues on page 2

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: MELANIE BROWN-WOOFER

CEO

04/17/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name REEVE, JAY
Address 2634 CAPITAL CIRCLE NE
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name HAYDEN, BRUCE
Address 6100 BLUE LAGOON DR.
SUITE 400
City-State-Zip: MIAMI FL 35126

Title SECRETARY
Name RUTHERFORD, JOE
Address 5707 N 22ND ST
City-State-Zip: TAMPA FL 33760

Title 2ND VICE CHAIRMAN
Name BURGESS, SCOTT
Address 6075 BATHEY LANE
City-State-Zip: NAPLES FL 34104

Title DIRECTOR
Name LOTT, APRIL
Address 1437 S BELCHER RD
City-State-Zip: CLEARWATER FL 33764

Title DIRECTOR
Name COBBS, DAN
Address 137 HOSPITAL DRIVE
City-State-Zip: FORT WALTON BEACH FL 32548

Title DIRECTOR
Name SCANLON, VICTORIA
Address 1700 EDUCATION AVENUE
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name WENNLUND, JERRY
Address 11254 58TH ST
City-State-Zip: PINELLAS PARK FL 33782

Title DIRECTOR
Name TOTO, IRENE
Address 3292 COUNTY RD 220
City-State-Zip: MIDDLEBURG FL 32068

Title DIRECTOR
Name DURRANCE, LINDA
Address 2833 REMINGTON GREEN CIR
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name CHERRY, JONATHAN
Address 515 W. MAIN ST
City-State-Zip: LEESBURG FL 34748

Title DIRECTOR
Name DEPIANO, LINDA
Address 1041 45TH STREET
City-State-Zip: WEST PALM BEACH FL 33407

Title TREASURER
Name GARDAM, BILL
Address 1835 GILMORE AVE
City-State-Zip: LAKELAND FL 33805

Title DIRECTOR
Name JARDON, MARIO
Address 4175 WEST 20TH AVENUE
City-State-Zip: HIALEAH FL 33012

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

Title CEO
Name BROWN-WOOFER, MELANIE
Address 316 E PARK AVE
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name FELDMAN, DAVID
Address 400 E. SHERIDAN ROAD
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR
Name COOK, STACEY
Address 3763 EVANS AVE
City-State-Zip: FORT MYERS FL 33901

Title DIRECTOR
Name LARKIN-SKINNER, MELISSA
Address 391 6TH AVENUE WEST
City-State-Zip: BRADENTON FL 34206

Title DIRECTOR
Name LANSER, ELEANOR
Address 1680 MERIDIAN AVENUE, SUITE 501
City-State-Zip: MIAMI BEACH FL 33139