

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756175

FILED
Jan 16, 2015
Secretary of State
CC4866864797

Entity Name: EXCHANGE CLUB CENTER FOR THE PREVENTION OF CHILD ABUSE OF THE TREASURE COAST, INC.

Current Principal Place of Business:

3525 W MIDWAY RD
FT PIERCE, FL 34981

Current Mailing Address:

P O BOX 12908
FT PIERCE, FL 34979 US

FEI Number: 59-2094472

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILVER, STANLEY
7700 WEXFORD WAY
PORT ST. LUCIE, FL 34986 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: STANLEY SILVER

01/16/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name MARRAFFA, LYNETTE
Address 2833 SE EAGLE DR
City-State-Zip: PORT ST. LUCIE FL 34984

Title DIRECTOR
Name WARNS, MADELEINE
Address 9045 ONE PUTT PLACE
City-State-Zip: PORT ST. LUCIE FL 34986

Title PRESIDENT
Name SILVER, STANLEY
Address 7700 WEXFORD WAY
City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR
Name DILLMAN, MICHAEL
Address 101 N US HWY 1
SUITE 120
City-State-Zip: FORT PIERCE FL 34950

Title DIRECTOR
Name HAISLEY-WHEELER, QUINN
Address 3015 OKEECHOBEE RD
City-State-Zip: FORT PIERCE FL 34947

Title DIRECTOR
Name SNYDER, RACHEL
Address 51 SW FLAGLER AVE
209
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name DEROSS, JOSEPH
Address 426 AVENUE A
City-State-Zip: FORT PIERCE FL 34950

Title DIRECTOR
Name HUNGER, RICK
Address 7698 WEXFORD WAY
City-State-Zip: PORT ST. LUCIE FL 34986

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: STANLEY SILVER

PRESIDENT

01/16/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name RONCAGLIONE, TAMMY
Address 9815 S US 1
City-State-Zip: PORT ST. LUCIE FL 34952

Title VP
Name TURNER, RITA
Address 9037 CHAMPIONS WAY
City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR
Name ROLLINS, JEFFREY
Address 715 DELAWARE AVE
City-State-Zip: FORT PIERCE FL 34950

Title DIRECTOR
Name WATFORD, DOWLING
Address 3175 HWY 441 SOUTH
City-State-Zip: OKEECHOBEE FL 34972

Title DIRECTOR
Name ROLLINS, JEFF
Address 715 DELAWARE AVE
City-State-Zip: FORT PIERCE FL 34950

Title VP
Name TRABULSY, DANA
Address 1400 HOPE ROAD
City-State-Zip: MAITLAND FL 32751

Title DIRECTOR
Name SPYTEK, ROSE
Address 623 17TH STREET
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name OSTEEN, ALLEN
Address 308 AVENUE A
City-State-Zip: FORT PIERCE FL 34950