Entity Name: FLORA HAMILTON ROBERTS COMMUNITY FUND CORPORATION

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### Current Principal Place of Business:

SOUTHWEST FLORIDA ENTERISES CENTER 3903 DR.MARTIN LUTHER KING BLVD, SUITE I FT MYERS, FL 33916

## **Current Mailing Address:**

DOCUMENT# N0000004109

P.O.BOX 9326 FORT MYERS, FL 33902-9326

### FEI Number: 65-1006189

### Name and Address of Current Registered Agent:

FORBES, LYNDA A 1107 MOHAWK PKWY CAPE CORAL, , FL 33914 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	LYNDA A FORBES			04/30/2016
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRES	Title	TREA	
Name	FORBES, LYNDA A	Name	UPSHAW-BENJAMIN, DAISY	
Address	1107 MOHAWK PKWY	Address	372 MONTGOMERY AVE	
City-State-Zip:	CAPE CORAL FL 33914	City-State-Zip:	FT MYERS FL 33905	
Title	VP	Title	D	
Name	SALVAGE, MARILYN	Name	HICKS-WILEY, HELEN	
Address	819 NUNA AVE	Address	2511 DAVIS STREET	
City-State-Zip:	FORT MYERS FL 33905	City-State-Zip:	FT MYERS FL 33916	
Title	DIRECTOR	Title	D	
Name	HEALEY, BEVERLY	Name	GERMAN, MIA	
Address	8110 SOUTHWOOD CIRCLE	Address	9058 LEATHERWOOD LOOP	
City-State-Zip:	APT.#7 FORT MYERS FL 33919	City-State-Zip:	LEHIGH ACRES, FL 33936	
		Title	DIRECTOR	
Title	SECRETARY	Name	WILLIAMS, CHERIE	
Name	SAVAGE, FRANCHESKA	Address	1101 WHITEHEAD CREEK LOO	OP
Address	819 NUNA AVE		FORT MYERS FL 33916	
City-State-Zip:	FORT MYERS, FL 33905	, <b>-</b>		
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DIRECTOR

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: MATTIE S YOUNG

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

04/30/2016 Date

# **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR	
Name	HARRIS, MATTIE	Name	HEATLEY, BEVERLY J	
Address	3049 ST. CHARLES STREET	Address	8110 SOUTHWOOD CIRCLE	
City-State-Zip:	FORT MYERS FL 33916	City-State-Zip:	APT #7 FORT MYERS, FL 33919	
Title	DIRECTOR			

Address1540 LOCKWOOD DRIVECity-State-Zip:FORT MYERS, FL 33916

Name

YOUNG, MATTIE S.