

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005647

Entity Name: SUNCOAST NEIGHBORHOOD TASK FORCE, INC.**Current Principal Place of Business:**2241 CASE LANE
NORTH FORT MYERS, FL 33917**Current Mailing Address:**SUNCOAST NEIGHBORHOOD TASK FORCE INC.
2241 CASE LANE
N. FT. MYERS, FL 33917 US**FEI Number:** 94-3415530**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PARRY, DEANNA SUSAN
2241 CASE LN.
N. FT. MYERS, FL 33917 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:** DEANNA S PARRY

01/25/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	ACTING CHAIRMAN
Name	PARRY, DEANNA SUSAN
Address	4781F SWANSON LOOP
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	TREASURER
Name	PARRY, DEANNA SUSAN
Address	4781F SWANSON LOOP
City-State-Zip:	N. FT. MYERS FL 33817

Title	CO-CHAIRMAN
Name	AVELINO, AUGUSTINO
Address	8220 SUNCOAST DR
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	PROGRAM DIRECTOR
Name	MATTHEWS, MARK
Address	2241 CASE LANE
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	SECRETARY
Name	DALY, KENNETH
Address	2241 CASE LANE
City-State-Zip:	NORTH FORT MYERS FL 33917

Title	GROUNDKEEPER
Name	GARRETSON, CHARLES
Address	8209 PENNY DR
City-State-Zip:	NORTH FORT MYERS FL 33917

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: DEANNA SUSAN PARRY

ACTING CHAIRMAN

01/25/2022

Electronic Signature of Signing Officer/Director Detail

Date