# Entity Name: THE CENTER OF HOPE OF SOUTH COUNTY, INC.

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# Current Principal Place of Business:

2395 SHAMROCK RD. VENICE, FL 34293

### **Current Mailing Address:**

DOCUMENT# N0000006861

2395 SHAMROCK RD. VENICE, FL 34293 US

# FEI Number: 65-1049834

#### Name and Address of Current Registered Agent:

MCCLELAND, LYNETTE E 4730 HERON ROAD VENICE, FL 34293 US Certificate of Status Desired: No

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:

Address

Electronic Signature of Registered Agent

## **Officer/Director Detail :**

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Title	P	Title	VP
Name	MCCLELAND, JAMES J	Name	MCCLELAND, LYNETTE E
Address	4730 HERON ROAD	Address	4730 HERON ROAD
City-State-Zip:	VENICE FL 34293	City-State-Zip:	VENICE FL 34293
Title	D	Title	TREASURER
Name	TUTCHER, DELORES	Name	PETTY, MARY ELIZABETH
Address	1426 GRAHAM ROAD	Address	1056 PANDA
City-State-Zip:	VENICE FL 34293	City-State-Zip:	VENICE FL 34293
Title	MRS	Title	MR
Name	MIGEDT, ANGELA	Name	MIGEDT, RON
Address	1079 TAMIAMI TR N PMB 109	Address	1079 TAMIAMI TR N PMB 109
City-State-Zip:	NOKOMIS FL 34275	City-State-Zip:	NOKOMIS FL 34275
Title	CHAIRMAN		
Name	TUERK, RON		

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: LYNETTE E MCCLELAND

City-State-Zip: VENICE FL 34292

875 MORGANTOWNE WAY

VICE PRESIDENT

04/10/2024

Electronic Signature of Signing Officer/Director Detail

FILED Apr 10, 2024 Secretary of State 8387613532CC

Date