

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00080

**Entity Name:** FLORIDA ASSOCIATION FOR VOLUNTEER RESOURCE  
MANAGEMENT, INC**FILED**  
**May 01, 2016**  
**Secretary of State**  
**CC9979382211****Current Principal Place of Business:**5400 E. HIGHWAY 100  
ROOM 110A  
PALM COAST, FL 32164**Current Mailing Address:**P.O. BOX 353755  
PALM COAST, FL 32135**FEI Number: 59-2305200****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**SUZANNE, GAMBLAIN  
5400 E. HIGHWAY 100  
ROOM 110A  
PALM COAST, FL 32164 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: SUZANNE GAMBLAIN****05/01/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           SCHMIDT, KRIS  
Address        RSVP - SOUTH FLORIDA STATE  
COLLEGE  
600 WEST COLLEGE DRIVE  
City-State-Zip: AVON PARK FL 33825

Title            DIRECTOR  
Name           BERGHS, KIM  
Address        UNITED WAY OF LEE, HENRY,  
GLADES  
7273 CONCOURSE DRIVE  
City-State-Zip: FORT MYERS FL 33908

Title            DIRECTOR  
Name           MCGEE, JENNIFER  
Address        159 S. COMMERCE AVE.  
City-State-Zip: SEBRING FL 33870

Title            DIRECTOR  
Name           JOSEPH, TAYLOR  
Address        192 COACH WAGONER BLVD.  
City-State-Zip: APALALACHICOLA FL 32320

Title            TRES  
Name           GAMBLAIN, SUZANNE  
Address        FLAGLER VOLUNTEER SERVICES  
5400 E. HIGHWAY 100 ROOM 110A  
City-State-Zip: PALM COAST FL 32164

Title            SECRETARY  
Name           PELT-WALKER, KAY  
Address        918 RAILROAD AVE.  
City-State-Zip: TALLAHASSEE FL 32310

Title            DIRECTOR  
Name           HARRIS, PHILIP C. DR.  
Address        DEPARTMENT OF CHILDREN &  
YOUTH SERVICES  
601 E. KENNEDY BLVD.  
City-State-Zip: TAMPA FL 33602

*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: SUZANNE GAMBLAIN****TREASURER****05/01/2016**

Electronic Signature of Signing Officer/Director Detail

Date