

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N02000003282

Entity Name: ALACHUA COUNTY COALITION FOR THE HOMELESS AND HUNGRY, INC.

FILED
Aug 22, 2016
Secretary of State
CC1365480386

Current Principal Place of Business:

3055 NE 28TH DRIVE
GAINESVILLE, FL 32609

Current Mailing Address:

3055 NE 28TH DRIVE
GAINESVILLE, FL 32609 US

FEI Number: 43-1960048

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOWE, THERESA
3055 NE 28TH DRIVE
GAINESVILLE, FL 32609 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name MUTCH, SAMUEL
Address 3055 NE 28TH DRIVE
City-State-Zip: GAINESVILLE FL 32609

Title SECRETARY
Name ACKERMAN, ROBERT
Address 3055 NE 28TH DRIVE
City-State-Zip: GAINESVILLE FL 32609

Title CEO
Name LOWE, THERESA
Address 3055 NE 28TH DRIVE
City-State-Zip: GAINESVILLE FL 32609

Title DIRECTOR
Name O'DELL, WILLIAM
Address 3055 NE 28TH DRIVE
City-State-Zip: GAINESVILLE FL 32609

Title DIRECTOR
Name EASTMAN, BRYAN
Address 3055 NE 28TH DRIVE
City-State-Zip: GAINESVILLE FL 32609

Title TREASURER
Name MUTCH, SAMUEL
Address 3055 NE 28TH DRIVE
City-State-Zip: GAINESVILLE FL 32609

Title DIRECTOR
Name FRENCH, ARTHUR
Address 3055 NE 28TH DRIVE
City-State-Zip: GAINESVILLE FL 32609

Title VC
Name GRADDY, JULIE
Address 3055 NE 28TH DRIVE
City-State-Zip: GAINESVILLE FL 32609

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: THERESA LOWE

CEO

08/22/2016

Electronic Signature of Signing Officer/Director Detail

Date