

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000003282

**FILED**  
**Feb 06, 2018**  
**Secretary of State**  
**CC9852050064**

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

**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:**

DECARMINE, JON  
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: JON DECARMINE**

**02/06/2018**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

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

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

Title CEO  
Name DECARMINE, JON  
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 DIRECTOR  
Name FRENCH, ARTHUR  
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: ROBERT ACKERMAN**

**TREASURER**

**02/06/2018**

Electronic Signature of Signing Officer/Director Detail

Date