

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003282

FILED
Jan 09, 2013
Secretary of State
CC4928083856

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

Current Principal Place of Business:

703 NE 1ST STREET
GAINESVILLE, FL 32601

Current Mailing Address:

703 NE 1ST STREET
GAINESVILLE, FL 32601

FEI Number: 43-1960048

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONAHAN, GAIL
703 NE 1ST STREET
GAINESVILLE, FL 32601 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 ELLIOTT, MIRIAM
Address 1371 SE 24TH AVENUE
City-State-Zip: GAINESVILLE FL 32641

Title S
Name KENNEDY, ANNETTE
Address 229 SW 5TH STREET
City-State-Zip: GAINESVILLE FL 32601

Title VC
Name SHORTLEY, BRENDAN
Address 703 NE 1ST STREET
City-State-Zip: GAINESVILLE FL 32601

Title TREASURER
Name O'GRADY, BETH
Address 703 NE 1ST STREET
City-State-Zip: GAINESVILLE FL 32601

Title DIRECTOR
Name BEACHY, THERESA
Address 703 NE 1ST STREET
City-State-Zip: GAINESVILLE FL 32601

Title DIRECTOR
Name HENDERSON, PEGGY
Address 703 NE 1ST STREET
City-State-Zip: GAINESVILLE FL 32601

Title DIRECTOR
Name DONOVAN, JACK
Address 703 NE 1ST STREET
City-State-Zip: GAINESVILLE FL 32601

Title DIRECTOR
Name FAGAN, DONNA
Address 703 NE 1ST STREET
City-State-Zip: GAINESVILLE FL 32601

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

EXECUTIVE DIRECTOR

01/09/2013

Electronic Signature of Signing Officer/Director Detail

Date