

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003935

Entity Name: CHRISTINA G. SMITH COMMUNITY MENTAL HEALTH FOUNDATION, INC.

FILED
Feb 10, 2023
Secretary of State
3011800381CC

Current Principal Place of Business:

601 SOUTH STATE RD 7
PLANTATION, FL 33317

Current Mailing Address:

601 SOUTH STATE RD 7
PLANTATION, FL 33317

FEI Number: 30-0130880

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, SEAN LESQ.
1880 N. CONGRESS AVENUE
SUITE 205
BOYNTON BEACH, FL 33426 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	D	Title	CO-P
Name	HIGGS, MARK	Name	CORREIA-KENT, JOANNE
Address	10829 NW 5TH STREET	Address	6007 NW 65 TERRACE
City-State-Zip:	PLANTATION FL 33324	City-State-Zip:	PARKLAND FL 33067
Title	CO-P	Title	D
Name	LAVALLE, DONNA L	Name	METHELIS, ALAN
Address	2819 NE 21ST TERRACE	Address	8813 W. SUNRISE BLVD
City-State-Zip:	FORT LAUDERDALE FL 33306	City-State-Zip:	PLANTATION FL 33322
Title	D	Title	DIRECTOR
Name	FONTANA, RAQUEL	Name	BENCIVENGA, ASHLEY
Address	1600 SW 131 TERRACE	Address	601 SOUTH STATE RD 7
City-State-Zip:	DAVIE FL 33325	City-State-Zip:	PLANTATION FL 33317
Title	DIRECTOR	Title	DIRECTOR
Name	COOK, MICHAEL	Name	ANDREWS, MAURICE
Address	601 SOUTH STATE RD 7	Address	601 SOUTH STATE RD 7
City-State-Zip:	PLANTATION FL 33317	City-State-Zip:	PLANTATION FL 33317

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: JOANNE CORREIA-KENT

CO-P

02/10/2023

Electronic Signature of Signing Officer/Director Detail

Date