2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005504

Entity Name: CHARLOTTE COUNTY COMPUTER GROUP CORPORATION

FILED
Jan 02, 2018
Secretary of State
CC7137203301

Current Principal Place of Business:

2280 AARON ST

PORT CHARLOTTE, FL 33952

Current Mailing Address:

2280 AARON ST

PORT CHARLOTTE, FL 33952

FEI Number: 05-0528272 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MUDD, GROVER 2280 AARON ST.

PORT CHARLOTTE, FL 33952 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: GROVER MUDD 01/02/2018

Electronic Signature of Registered Agent

Officer/Director Detail:

 Title
 VP
 Title
 SECRETARY

 Name
 PILCH, YVETTE
 Name
 RIST, LYDIA

 Address
 2280 AARON ST
 Address
 2280 AARON ST

City-State-Zip: PORT CHARLOTTE FL 33952 City-State-Zip: PORT CHARLOTTE FL 33952

Title DIRECTOR Title TRES

Name EVANS, DICK Name NIXON, HAROLD
Address 2280 AARON ST Address 2280 AARON ST

City-State-Zip: PORT CHARLOTTE FL 33952 City-State-Zip: PORT CHARLOTTE FL 33952

TitleDIRECTORTitlePRESIDENTNameWHALEN, DONNANameMUDD, GROVERAddress2280 AARON STAddress2280 AARON ST

City-State-Zip: PORT CHARLOTTE FL 33952 City-State-Zip: PORT CHARLOTTE FL 33952

Title DIRECTOR Title DIRECTOR

NameKOPENEC, GEORGENameMUSCHONG, RONAddress2280 AARON STAddress2280 AARON STCity-State-Zip:PORT CHARLOTTE FL 33952City-State-Zip:PORT CHARLOTTE FL

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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: GROVER MUDD PRESIDENT 01/02/2018

Electronic Signature of Signing Officer/Director Detail

Date

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name WALLIS, RONALD D

Address 2280 AARON ST.

City-State-Zip: PORT CHARLOTTE FL 33952