

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000335

Entity Name: VCHFOUNDATION.ORG INC

Current Principal Place of Business:

3593 PALMER AVE - 1ST FLOOR
BRONX, NY 10466

Current Mailing Address:

3593 PALMER AVE - 1ST FLOOR
BRONX, NY 10466 US

FEI Number: 37-1454426

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALKER, VILMA
12034 N.W. 13TH STREET
PEMBROKE PINES, FL 33020 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 PD
Name WALKER, VILMA MSR.
Address 3593 PALMER AVE
City-State-Zip: BRONX NY 10466

Title VD
Name SOARES, NATALIE NJR
Address 3593 PALMER AVE
City-State-Zip: BRONX NY 10466

Title STD
Name SOARES, CHRISTOPHER LJR.
Address 3593 PALMER AVE
City-State-Zip: BRONX NY 10466

Title P
Name WALKER, VILMA M
Address 3593 PALMER AVE - 1ST FLOOR
City-State-Zip: BRONX NY 10466

Title VP
Name SOARES, NATALIE
Address 3593 PALMER AVE - 1ST FLOOR
City-State-Zip: BRONX NY 10466

Title GMGR
Name SOARES, CHRISTOPHER
Address 3593 PALMER AVE - 1ST FLOOR
City-State-Zip: BRONX NY 10466

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: VILMA WALKER

PRESIDENT

03/07/2017

Electronic Signature of Signing Officer/Director Detail

Date