

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002615

Entity Name: FLORIDA CRISIS RESPONSE TEAM, INCORPORATED

Current Principal Place of Business:

3420 MEDICI BLVD.
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

3420 MEDICI BLVD.
NEW SMYRNA BEACH, FL 32168 US

FEI Number: 65-1212274

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSSMAN, BETH
3420 MEDICI BLVD.
NEW SMYRNA BEACH, FL 32168 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 ROSSMAN, BETH J
Address 2186 KINGS CROSS STREET
City-State-Zip: TITUSVILLE FL 32796

Title EXECUTIVE SECRETARY
Name ROWE-HILL, HARRIETTE
Address PO BOX 939
City-State-Zip: MIMS FL 32754

Title D
Name ZENERE, FRANK
Address 785 FALLING WATER ROAD
City-State-Zip: WESTON FL 33326

Title DIRECTOR
Name MOUTON, CHRISTINE
Address 319 BLUEJAY WAY
City-State-Zip: ORLANDO FL 32828

Title DIRECTOR
Name WENNERSTROM, DEBBIE
Address 10939 VERSAILLES BLVD.
City-State-Zip: CLERMONT FL 34711

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: BETH ROSSMAN

CHAIRPERSON

01/16/2019

Electronic Signature of Signing Officer/Director Detail

Date