2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004381

Entity Name: SUNCOAST PARTNERSHIP TO END HOMELESSNESS, INC.

FILED Feb 24, 2022 Secretary of State 3958432519CC

Current Principal Place of Business:

1750 17TH STREET C-1 BUILDING SARASOTA, FL 34234

Current Mailing Address:

1750 17TH STREET C-1 BUILDING

SARASOTA, FL 34234 US

FEI Number: 20-2783762 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DEMARCO, EDWARD 1750 17TH STREET C-1 BUILDING SARASOTA, FL 34234 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: JACKIE MCNEIL AS AGENT 02/24/2022

> Date Electronic Signature of Registered Agent

> > City-State-Zip:

SARASOTA FL 34232

DIRECTOR

Officer/Director Detail:

Title DIRECTOR Title CHAIRMAN

Name SMITH, RITA Name GORELICK, PHILIP

856 FORESTVIEW DRIVE Address COLDWELL BANKER RESIDENTIAL Address

REAL ESTATE 415 EAGLES NEST LANE

SARASOTA FL 34243

City-State-Zip: Title DIRECTOR

Name ARROYO, ERICK Title CEO, BOARD SECRETARY

CITY OF SARASOTA JOHNSON, CHRISTOPHER Address Name

1565 1ST STREET ROOM 101 1750 17TH STREET

Title

Address City-State-Zip: SARASOTA FL 34236 C-1 BUILDING

City-State-Zip: SARASOTA FL 34234

Name FIELDS, PAMELA Title DIRECTOR

Address 1900 MAIN STREET Name MOORE, DAVID

SUITE 302 Address 2824 LOUISE STREET SARASOTA FL 34236 City-State-Zip:

City-State-Zip: SARASOTA FL 34237

Title DIRECTOR Title DIRECTOR

Name REGNIER, ANGELA PORETSKY, MARTIN Name Address 2155 MAIN STREET 3040 GRAND BAY BLVD. Address

City-State-Zip: SARASOTA FL 34236 273

LONGBOAT KEY FL 34228 City-State-Zip: Continues on page 2

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: CHRISTOPHER JOHNSON CHIEF EXECUTIVE 02/24/2022 **OFFICER**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title **DIRECTOR** Name SERVIA, MISTY Address PO BOX 1000

BRADENTON FL 34206 City-State-Zip:

Title VC

PORETSKY, MARTIN Name 3040 GRAND BAY BLVD. Address

273

City-State-Zip: LONG BOAT KEY FL 34228

Title **DIRECTOR**

Name LEVIN, MARCELLA

Address 1111 N.GULFSTREAM AVE

APT. 3B

City-State-Zip: SARASOTA FL 34236

Title **DIRECTOR**

Name FIELDS, PAMELA

1900 MAIN STREET Address

SUITE 302

City-State-Zip: SARASOTA FL 34236

Title DIRECTOR

Name RICHKER, MICHAEL

Address 7618 HEATHFIELD COURT City-State-Zip: UNIVERSITY PARK FL 34201

Title INTERIM TREASURER Name RICHKER, MICHAEL

7618 HEATHFIELD COURT Address

City-State-Zip: UNIVERSITY PARK FL 34201

Title **DIRECTOR** Name SERVIA, MISTY

Address

PO BOX 1000 City-State-Zip: BRADENTON FL 34206-1000