

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004381

FILED
Mar 03, 2020
Secretary of State
4049138420CC

Entity Name: SUNCOAST PARTNERSHIP TO END HOMELESSNESS, INC.

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

03/03/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VC
Name SMITH, RITA
Address COLDWELL BANKER RESIDENTIAL
REAL ESTATE
1411 10TH AVE. EAST
City-State-Zip: PALMETTO FL 34221

Title CEO, BOARD SECRETARY
Name JOHNSON, CHRISTOPHER
Address 1750 17TH STREET
C-1 BUILDING
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name LUNDY, DANIEL F.
Address 5855 MIDNIGHT PASS ROAD
#528
City-State-Zip: SARASOTA FL 34242

Title DIRECTOR
Name FIELDS, PAMELA
Address 1900 MAIN STREET
SUITE 302
City-State-Zip: SARASOTA FL 34236

Title CHAIRMAN
Name GORELICK, PHILIP
Address 856 FORESTVIEW DRIVE
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR
Name FREELAND EDDIE, SHELLI
Address CITY OF SARASOTA
1565 1ST STREET ROOM 101
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name MOORE, DAVID
Address 2824 LOUISE STREET
City-State-Zip: SARASOTA FL 34237

Title DIRECTOR
Name PORETSKY, MARTIN
Address 3040 GRAND BAY BLVD.
273
City-State-Zip: LONGBOAT KEY FL 34228

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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: CHRISTOPHER JOHNSON

**CHIEF EXECUTIVE
OFFICER**

03/03/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name REGNIER, ANGELA
Address 2155 MAIN STREET
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR
Name SERVIA, MISTY
Address PO BOX 1000
City-State-Zip: BRADENTON FL 34206

Title DIRECTOR
Name RICKER, MICHAEL
Address 7618 HEATHFIELD COURT
City-State-Zip: UNIVERSITY PARK FL 34201