## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007183

Entity Name: S.T.A.R.S. OF WEST ORANGE, INC.

FILED
Jan 20, 2020
Secretary of State
2678867111CC

## **Current Principal Place of Business:**

9401 WEST COLONIAL DRIVE

SUITE 106

OCOEE, FL 34761-6803

## **Current Mailing Address:**

9401 WEST COLONIAL DRIVE

SUITE 106

OCOEE, FL 34761-6803 US

FEI Number: 20-3574921 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DOUGLAS, ALLISHA 9401 WEST COLONIAL DRIVE SUITE 106

OCOEE, FL 34761-6803 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: ALLISHA DOUGLAS 01/20/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

SUITE 106

Title DIRECTOR Title DIRECTOR

Name DILLARD, DORCAS Name DOBSON, VALERIE

Address 9401 WEST COLONIAL DRIVE Address 9401 WEST COLONIAL DRIVE

SUITE 106 SUITE 106

City-State-Zip: OCOEE FL 34761-6803 City-State-Zip: OCOEE FL 34761-6803

Title EXECUTIVE, DIRECTOR Title DIRECTOR

Name DOUGLAS, ALLISHA Name DENOON, PATRICIA

Address 9401 WEST COLONIAL DRIVE Address 9401 WEST COLONIAL DRIVE

SUITE 106 SUITE 106

City-State-Zip: OCOEE FL 34761-6803 City-State-Zip: OCOEE FL 34761-6803

Title SECRETARY Title PRESIDENT

Name SIEGEL, SARAH Name GIBSON, PETER

Address 9401 WEST COLONIAL DRIVE Address 9401 WEST COLONIAL DRIVE

SUITE 106 SUITE 106

City-State-Zip: OCOEE FL 34761-6803 City-State-Zip: OCOEE FL 34761-6803

Title DIRECTOR Title TREASURER

Name QUICUTIS, JOLYNN Name CASWELL, PAUL III

Address 9401 WEST COLONIAL DRIVE Address 9401 WEST COLONIAL DRIVE

SUITE 106

City-State-Zip: OCOEE FL 34761-6803 City-State-Zip: OCOEE FL 34761-6803

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: ALLISHA DOUGLAS EXECUTIVE DIRECTOR 01/20/2020