

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007183

FILED
Apr 02, 2016
Secretary of State
CC8693132788

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

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

04/02/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name DILLARD, DORCAS
Address 9401 WEST COLONIAL DRIVE
SUITE 106
City-State-Zip: OCOEE FL 34761-6803

Title DIRECTOR
Name DOBSON, VALERIE
Address 9401 WEST COLONIAL DRIVE
SUITE 106
City-State-Zip: OCOEE FL 34761-6803

Title EXECUTIVE, DIRECTOR
Name DOUGLAS, ALLISHA
Address 9401 WEST COLONIAL DRIVE
SUITE 106
City-State-Zip: OCOEE FL 34761-6803

Title DIRECTOR
Name FRENCH, SANDRA
Address 9401 WEST COLONIAL DRIVE
SUITE 106
City-State-Zip: OCOEE FL 34761-6803

Title SECRETARY
Name SIEGEL, SARAH
Address 9401 WEST COLONIAL DRIVE
SUITE 106
City-State-Zip: OCOEE FL 34761-6803

Title PRESIDENT
Name GIBSON, PETER
Address 9401 WEST COLONIAL DRIVE
SUITE 106
City-State-Zip: OCOEE FL 34761-6803

Title DIRECTOR
Name QUICUTIS, JOLYNN
Address 9401 WEST COLONIAL DRIVE
SUITE 106
City-State-Zip: OCOEE FL 34761-6803

Title TREASURER
Name CASWELL, PAUL III
Address 9401 WEST COLONIAL DRIVE
SUITE 106
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 N. DOUGLAS

EXECUTIVE DIRECTOR

04/02/2016

Electronic Signature of Signing Officer/Director Detail

Date