

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000007183

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

**FILED**  
**Jun 13, 2019**  
**Secretary of State**  
**5095532123CC**

**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

06/13/2019

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 DENOON, PATRICIA  
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 DOUGLAS

**EXECUTIVE DIRECTOR**

06/13/2019

Electronic Signature of Signing Officer/Director Detail

Date