

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008352

Entity Name: HOMELESS FAMILY CENTER FOUNDATION, INC.

Current Principal Place of Business:

720 4TH STREET
VERO BEACH, FL 32962

Current Mailing Address:

715 4TH PLACE
VERO BEACH, FL 32962

FEI Number: 20-5412903

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAGUIRE, MARY ELLEN
715 4TH PLACE
VERO BEACH, FL 32962 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: MARY ELLEN MAGUIRE

01/09/2014

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SOBKOWIAK, ROGER
Address 537 44TH AVENUE SW
City-State-Zip: VERO BEACH FL 32968

Title SECRETARY
Name ROBINSON, CHARLES
Address 3328 CARACAL DRIVE
City-State-Zip: FT. PIERCE FL 34949

Title TREASURER
Name MACKIE, THOMAS
Address 1205 MARINA VILLAGE CIRCLE
 UNIT 401
City-State-Zip: VERO BEACH FL 32967

Title CEO
Name MAGUIRE, MARY ELLEN
Address 720 4TH STREET
City-State-Zip: VERO BEACH FL 32962

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: MARY ELLEN MAGUIRE

EXECUTIVE DIRECTOR

01/09/2014

Electronic Signature of Signing Officer/Director Detail

Date