

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000005139

**Entity Name:** PARTNERSHIP RESPONSE COALITION, INC.

**Current Principal Place of Business:**

2648 RAVENALL AVENUE  
ORLANDO, FL 32811

**Current Mailing Address:**

P. O. BOX 618409  
ORLANDO, FL 32861 US

**FEI Number:** 30-0559948

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MONTGOMERY, JACQUELINE L  
2648 RAVENALL AVENUE  
ORLANDO, FL 32811 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PTS  
Name            MONTGOMERY, JACQUELINE L  
Address        2648 RAVENALL AVENUE  
City-State-Zip: ORLANDO FL 32811

Title            D  
Name            WARREN, PAMELA  
Address        1025 S. KIRKMAN RD - APT. 101  
City-State-Zip: ORLANDO FL 32811

*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:** JACQUELINE MONTGOMERY

**PRESIDENT**

**04/30/2015**

Electronic Signature of Signing Officer/Director Detail

Date