#### 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. PRESIDENT

#### SIGNATURE: MONICA GUERRERO

Electronic Signature of Signing Officer/Director Detail

04/25/2016

# 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# DOCUMENT# N15000004732

Entity Name: SHALOM OVER VIOLENCE COMMUNITY DEVELOPMENT CORPORATION

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

300 S. DUNCAN AVE SUITE 263 CLEARWATER, FL 33755

#### **Current Mailing Address:**

P.O. BOX 4283 CLEARWATER, FL 33758

### FEI Number: 47-4800790

### Name and Address of Current Registered Agent:

**GUERRERO, MONICA P** 1601 DRUID RD E CLEARWATER, FL 33756 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

### **Officer/Director Detail :**

Title	D	Title	VP
Name	GUERRERO, MONICA P	Name	ATO, MIRTA
Address	101 S. OLD COACHMAN ROAD #724	Address	6807 SUNDROP ST.
City-State-Zip:	CLEARWATER FL 33765	City-State-Zip:	HARMONY FL 34773
Title	S/T	Title	TREASURER
Title Name	S/T JACOME, ALMA D	Title Name	TREASURER GARCIA, JOSE MIGUEL

# Certificate of Status Desired: Yes

Date

Date

#### FILED Apr 25, 2016 Secretary of State CC8310031170