## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000006777

Entity Name: BREAKING THE CYCLE INSTITUTE, INC.

**FILED** Apr 26, 2017 **Secretary of State** CC7079079108

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

2921 S.ORLANDO DR., SUITE 164 SANFORD, FL 32773

## **Current Mailing Address:**

2921 S.ORLANDO DR., SUITE 164 SANFORD, FL 32773

FEI Number: 47-4717882 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

REID, LAURIE A 2921 S.ORLANDO DR., SUITE 164 SANFORD, FL 32773 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 PΠ Title VC

REID, LAURIE A Name HROBAK-SENNEFELDER, SHANNON Name

2921 S.ORLANDO DR., SUITE 164 Address 888 MILL CREEK RD. Address

City-State-Zip: NEWFOUNDLAND PA 18444 SANFORD FL 32773 City-State-Zip:

Title TD Title D

Name WILLIAMSON, CHARLIE R JR. Name FREDERICK, DAVINIA 2921 S.ORLANDO DR., SUITE 164 Address Address 414 ELLIS SQUARE CT.

SANFORD FL 32773 City-State-Zip: SANFORD FL 32771 City-State-Zip:

Title SD

HARTAGE, HOMER Name Address 4862 INDIALANTIC DR. City-State-Zip: ORLANDO FL 32808

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: LAURIE A REID PD