

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000007651

**Entity Name:** GIVE A KID A COAT FOUNDATION INC

**Current Principal Place of Business:**

2634 LITTLE HILL COVE, APT. 208  
OVIDO, FL 32765

**Current Mailing Address:**

2634 LITTLE HILL COVE, APT.208  
OVIDO, FL 32765

**FEI Number:** 47-3881246

**Certificate of Status Desired:** No

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

EDMONDS, DEBRA  
2634 LITTLE HILL COVE, #208  
OVIDO, FL 32765 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 P  
Name EDMONDS, DEBRA  
Address 2634 LITTLE HILL COVE, APT. 208  
City-State-Zip: OVIDO FL 32765

Title SECRETARY  
Name JONES, PLASHETTA  
Address 10642 CARLOWAY HILL DRIVE  
City-State-Zip: WIMAUMA FL 33598

Title TREASURER  
Name JACKSON, DELBRA  
Address 444 LOS ALTOS WAY, APT. 302  
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title DIRECTOR  
Name EDMONDS, JEREMY  
Address 2634 LITTLE HILL CIR  
208  
City-State-Zip: OVIDO FL 32765

*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:** DEBRA EDMONDS

P

03/31/2016

Electronic Signature of Signing Officer/Director Detail

Date