

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000007651

Entity Name: GIVE A KID A COAT FOUNDATION INC**Current Principal Place of Business:**1084 VISTA HAVEN CIR
APT 202
ORLANDO, FL 32825**Current Mailing Address:**1084 VISTA HAVEN CIR
APT 202
ORLANDO, FL 32825 US**FEI Number:** 47-3881246**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EDMONDS, DEBRA
1084 VISTA HAVEN CIR
APT 202
ORLANDO, FL 32825 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 1084 VISTA HAVEN CIR
APT 202
City-State-Zip: ORLANDO FL 32825

Title VP
Name JONES, PLASHETTA
Address 11602 VALENCIA DR
City-State-Zip: SEFFNER FL 33584

Title DIRECTOR
Name YOUNG, VICKIE F
Address 3801 E. HANNA AVE.
City-State-Zip: TAMPA FL 33610

Title DIRECTOR
Name BLACKWELL, JANICE
Address 539 SOUTH ANCHOR DR.
City-State-Zip: DELTONA FL 32725

Title TREASURER
Name JACKSON, DELBRA
Address 453 SUNNYVIEW CIR
City-State-Zip: ORLANDO FL 32810

Title DIRECTOR
Name EDMONDS, JEREMY
Address 1084 VISTA HAVEN CIR
APT 202
City-State-Zip: ORLANDO FL 32825

Title SECRETARY
Name COBBS- MCKNIGHT, JUDITHANN
Address 253 HAWTHORNE GROVE BLVD.
APT 104
City-State-Zip: ORLANDO FL 32835

Title LEGAL ADVISOR
Name WARNER, DEBORAH
Address 5200 SOUTH US HIGHWAY 17-92
City-State-Zip: CASSELBERRY FL 32707

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**PRESIDENT****03/13/2018**

Electronic Signature of Signing Officer/Director Detail

Date