

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15903

Entity Name: RETURNED PEACE CORPS VOLUNTEERS OF SOUTH FLORIDA ,INC.**FILED**
Jan 26, 2019
Secretary of State
0474483074CC**Current Principal Place of Business:**ZELL, GREGORY T.
3231 MARY STREET #3
MIAMI, FL 33133**Current Mailing Address:**RPCVSF
P.O. BOX 661001
MIAMI, FL 33266-1001 US**FEI Number: 59-2870906****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**ZELL, GREGORY T.
3231 MARY STREET
#3
MIAMI, FL 33133 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 PRESIDENT
Name KOTAS, WILLIAM
Address RPCVSF
 P.O. BOX 661001
City-State-Zip: MIAMI FL 33266-1001

Title SECRETARY
Name LAMBERTS, MARY
Address RPCVSF
 P.O. BOX 661001
City-State-Zip: MIAMI FL 33266-1001

Title VP
Name WOS, JEN
Address RPCVSF
 P.O. BOX 661001
City-State-Zip: MIAMI FL 33266-1001

Title TREASURER
Name VINCENT, DORIS
Address RPCVSF
 P.O. BOX 661001
City-State-Zip: MIAMI FL 33266-1001

Title DIRECTOR, MEMBERSHIP
Name JUNG, BARBARA A ESQ.
Address RPCVSF
 P.O. BOX 661001
City-State-Zip: MIAMI FL 33266-1001

Title DIRECTOR, FTM
Name WHITMYRE, LINDA
Address RPCVSF
 P.O. BOX 661001
City-State-Zip: MIAMI FL 33266-1001

Title COMPTROLLER
Name HANCOCK, THOMAS M
Address RPCVSF
 P.O. BOX 661001
City-State-Zip: MIAMI FL 33266-1001

Title DIRECTOR
Name PHARES, PATTY
Address RPCVSF
 P.O. BOX 661001
City-State-Zip: MIAMI FL 33266-1001

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: THOMAS M HANCOCK**CONTROLLER****01/26/2019**

Electronic Signature of Signing Officer/Director Detail

Date