2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT	

DOCUMENT# N17000012652

Entity Name: CYSTIC FIBROSIS CONTINUITY OF CARE FOUNDATION, INC.

Current Principal Place of Business:

4126 CUMMINGS STREET ORLANDO, FL 32828

Current Mailing Address:

4126 CUMMINGS STREET ORLANDO, FL 32828 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

GRUBBS, TAMIKA 4126 CUMMINGS STREET ORLANDO, FL 32828 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	DIRECTOR, BOARD MEMBER	Title	BOARD MEMBER
Name	GRUBBS, TAMIKA LAUNYAE	Name	SCOTT , SANJANE
Address	4126 CUMMINGS STREET	Address	4126 CUMMINGS S
City-State-Zip:	ORLANDO FL 32828	City-State-Zip:	ORLANDO FL 328
Title	BOARD MEMBER		
Name	BULLOCK, AYANNA N		
Address	4126 CUMMINGS STREET		
City-State-Zip:	ORLANDO FL 32828		

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: TAMIKA L GRUBBS

DIRECTOR FOUNDER

03/26/2020 Date

Electronic Signature of Signing Officer/Director Detail

FILED Mar 26, 2020 Secretary of State 7169296403CC

Certificate of Status Desired: No

Date

le	BOARD MEMBER	
ame	SCOTT , SANJANETTE LAGAYLE	
ldress	4126 CUMMINGS STREET	
ty-State-Zip:	ORLANDO FL 32828	