

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18000004405

Entity Name: CAPITAL COLLABORATIVE GROUP, INC.

Current Principal Place of Business:

851 EAST PARK AVE.
TALLAHASSEE, FL 32301

Current Mailing Address:

851 EAST PARK AVE.
TALLAHASSEE, FL 32301 US

FEI Number: 82-5257879

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ, CHRISTIN ESQ.
851 EAST PARK AVE.
TALLAHASSEE, FL 32301 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 BORNTRERGER, RACHEL ESQ.
Address 2520-1 BARRINGTON CIR.
City-State-Zip: TALLAHASSEE FL 32308

Title VP
Name RUMPH, JERRY ESQ.
Address 2810 REMINGTON GREEN CIR.
City-State-Zip: TALLHASSEE FL 32308

Title T
Name POPLER, BARBARA CPA
Address P.O. BOX 13645
City-State-Zip: TALLAHASSEE FL 32317

Title S
Name GONZALEZ, CHRISTIN ESQ.
Address 851 EAST PARK AVE.
City-State-Zip: TALLAHASSEE FL 32301

Title D
Name HUSTON, TYLER
Address 2833 REMINGTON GREEN CIR.
City-State-Zip: TALLHASSEE FL 32308

Title D
Name WEAVER, DEBRA
Address 2880 CAPITAL MEDICAL BLVD., STE.2
City-State-Zip: TALLAHASSEE FL 32308

Title D
Name SWEETING, JENNIFER ESQ.
Address 2810 REMINGTON GREEN CIR.
City-State-Zip: TALLAHASSEE FL 32308

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: BARBARA POPLER

TREASURER

04/05/2019

Electronic Signature of Signing Officer/Director Detail

Date