

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19000002890

**Entity Name:** OUR CITY BEAUTIFUL, INC

**Current Principal Place of Business:**

2416 S. MYRTLE AVE  
SANFORD, FL 32771

**Current Mailing Address:**

PO BOX 470743  
SANFORD, FL 32747 US

**FEI Number:** 83-4158158

**Certificate of Status Desired:** No

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

CHINCHAK, HOPE R  
2416 S. MYRTLE AVE  
SANFORD, FL 32771 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 F, PRESIDENT  
Name CHINCHAK, HOPE R  
Address 2416 S. MYRTLE AVE  
City-State-Zip: SANFORD FL 32771

Title OFFICER  
Name CHINCHAK, JOSEPH F  
Address 2416 S. MYRTLE AVE  
City-State-Zip: SANFORD FL 32771

Title VP  
Name SHORT, KATIE  
Address PO BOX 470743  
City-State-Zip: SANFORD FL 32747

Title SECRETARY  
Name MARTINEZ, BETZEIDA  
Address PO BOX 470743  
City-State-Zip: SANFORD FL 32747

Title DIRECTOR  
Name BALLARD, ERIN  
Address PO BOX 470743  
City-State-Zip: SANFORD FL 32747

Title DIRECTOR  
Name DILLEY, KATHERINE  
Address PO BOX 470743  
City-State-Zip: SANFORD FL 32747

*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:** HOPE CHINCHAK

**FOUNDER/PRESIDENT**

**03/17/2020**

Electronic Signature of Signing Officer/Director Detail

Date