## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22498

Entity Name: SUNCOAST CHAPTER OF THE FLORIDA ASSOCIATION OF

MORTGAGE BROKERS, INC.

**Current Principal Place of Business:** 

767 SHAMROCK BLVD VENICE FL 34293

VENICE, FL 34293

**Current Mailing Address:** 

631 US HWY ONE SUITE 400

NORTH PALM BEACH, FL 33408 US

FEI Number: 65-0056318 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BROOKS, GREG 631 US HWY ONE SUITE 400

NORTH PALM BEACH, FL 33408 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: GREG BROOKS 03/15/2017

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT Title T

NameBITNER, SHERRYNameKOWALCZYK, DARLENEAddress5767 FORESTER OAK CT.Address767 SHAMROCK BLVDCity-State-Zip:SARASOTA FL 34243City-State-Zip:VENICE FL 34293

Title PRESIDENT ELECT Title DIRECTOR

Name MEEHAN, IRENE Name HOGREFE, SUE

Address 11074 CARNEGIE AVE. Address 5954 PANORAMA LANE
City-State-Zip: ENGLEWOOD FL 34224 City-State-Zip: NORTH PORT FL 35287

Title **SECRETARY** Title DIRECTOR CARDEN, DONNA Name Name CLERMONT, YVETTE Address 4198 VALLARTA CT. Address 961 145TH ST. CIR NE City-State-Zip: SARASOTA FL 34233 **BRADENTON FL 34212** City-State-Zip:

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: DARLENE KOWALCZYK

**TREASURER** 

03/15/2017

FILED Mar 15, 2017

**Secretary of State** 

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