#### 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24735

Entity Name: HOPE AND HELP CENTER OF CENTRAL FLORIDA, INC.

**FILED** Mar 17, 2023 **Secretary of State** 2523139744CC

## **Current Principal Place of Business:**

4122 METRIC DRIVE SUITE 800

WINTER PARK, FL 32792-6809

# **Current Mailing Address:**

4122 METRIC DRIVE SUITE 800

WINTER PARK, FL 32792-6809 US

FEI Number: 59-2872225 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

MEEHLE, SUZANNE D 1215 E CONCORD STREET ORLANDO, FL 32803 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: SUZANNE D. MEEHLE. ESQ. 03/17/2023

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

**EXECUTIVE DIRECTOR** Title Title DIRECTOR

Name BARR, LISA Name ADAMS, ROBERT

Address 1315 CLUBHOUSE DRIVE Address 30 INDIAN VILLAGE TRAIL COCOA BEACH FL 32931 City-State-Zip: VIERA FL 32955 City-State-Zip:

Title **DIRECTOR** Title DIRECTOR

RICHARDSON, TRACY Name IDTENSOHN, SUE Name **8 SOUTH STREET** Address 3913 ROSE OF SHARON DR. Address City-State-Zip: TITUSVILLE FL 32780 ORLANDO FL 32808 City-State-Zip:

Title **PRESIDENT** Title **TREASURER** 

Name POWELL, BLAKE Name PALMISANO, JAMES

Address 1247 BRIDLEBROOK DRIVE Address 13030 WESTSIDE VILLAGE LOOP

City-State-Zip: CASSELBERRY FL 32707 City-State-Zip: WINDERMERE FL 34786

**DIRECTOR** Title Title VΡ Name JONES, DEBI Name MEEHLE, SUZANNE D

Address 416 W COLONIAL DRIVE Address **607 HERMITS TRAIL** ORLANDO FL 32804 City-State-Zip:

ALTAMONTE SPRINGS FL 32701 City-State-Zip:

### Continues on page 2

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.

03/17/2023 **EXECUTIVE DIRECTOR** SIGNATURE: LISA BARR

# Officer/Director Detail Continued:

Title SECRETARY Title DIRECTOR

Name CORBELLI, ERIN Name MUSZYNSKI, MICHAEL

Address 330 GREY OWL RUN Address 214 LITTLEHAMPTON CLOSE

City-State-Zip: CHULUOTA FL 32766 City-State-Zip: LONGWOOD FL 32779