

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32845

Entity Name: CHARLOTTE COUNTY HOMELESS COALITION, INC.

Current Principal Place of Business:

1476 KENESAW STREET
PORT CHARLOTTE, FL 33948

Current Mailing Address:

P.O. BOX 380157
MURDOCK, FL 33938

FEI Number: 65-0139525

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HAWKER, BRETT
17300 PRAIRIE CREEK BLVD
PUNTA GORDA, FL 33982 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: BRETT HAWKER

04/25/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EMERITUS
Name MARTELLA, MARK PA
Address PO BOX 380157
City-State-Zip: MURDOCK FL 33938

Title CEO
Name FIGLIUOLO, TINA
Address PO BOX 380157
City-State-Zip: MURDOCK FL 33938-0157

Title EMERITUS
Name SIMPSON, TONI
Address P.O.BOX 380157
City-State-Zip: MURDOCK FL 33938

Title EMERITUS
Name RUSSELL, W. KEVIN ESQ.
Address 14295 S. TAMIAMI TR
City-State-Zip: NORTHPORT FL 34287

Title SECRETARY
Name HOUSEMAN, ASHLEY B
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938

Title CFO
Name MOORE, LARA Z
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938

Title FOUNDATION CHAIR
Name GEROW, JUSTIN
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938

Title DIRECTOR
Name HENYEEZ, LOUIS
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938

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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: LARA Z MOORE

CFO

04/25/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TREASURER
Name FINING, BARBARA
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938

Title DIRECTOR
Name REYNOLDS, CARA
Address PO BOX 380157
City-State-Zip: MURDOCK FL 33938

Title DIRECTOR
Name NENADOVICH, TAMMY
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938

Title PRESIDENT
Name HAWKER, BRETT
Address PO BOX 380157
City-State-Zip: MURDOCK FL 33938

Title DIRECTOR
Name SHINER, JESSICA
Address PO BOX 380157
City-State-Zip: MURDOCK FL 33938

Title DIRECTOR
Name MAYMON, CHERYL
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938