

2024 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: No

Name and Address of Current Registered Agent:

PERVIN, LISA
1476 KENESAW STREET
PORT CHARLOTTE, FL 33948 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: LISA PERVIN

06/18/2024

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 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 DIRECTOR
Name CASANO, ROCCO
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938

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

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

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

Title PRESIDENT
Name MAYMON, CHERYL
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: CHERYL A MAYMON

BOARD PRESIDENT

06/18/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name LISA, PERVIN
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938

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

Title DIRECTOR
Name SINGH-DESA, POLYANA
Address P.O. BOX 380157
City-State-Zip: MURDOCK FL 33938