2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N32845

Entity Name: CHARLOTTE COUNTY HOMELESS COALITION, INC.

FILED
Apr 11, 2023
Secretary of State
3470138276CC

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:

FIGLIUOLO, TINA 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: TINA FIGLIUOLO 04/11/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

THE LIMENTOS THE CL	Title	EMERITUS	Title	CEO
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Name MARTELLA, MARK PA Name FIGLIUOLO, TINA
Address PO BOX 380157 Address PO BOX 380157

City-State-Zip: MURDOCK FL 33938 City-State-Zip: MURDOCK FL 33938-0157

Title EMERITUS Title EMERITUS

NameSIMPSON, TONINameRUSSELL, W. KEVIN ESQ.AddressP.O.BOX 380157Address14295 S. TAMIAMI TRCity-State-Zip:MURDOCK FL 33938City-State-Zip:NORTHPORT FL 34287

Title CFO Title DIRECTOR

 Name
 MOORE, LARA Z
 Name
 HENYEEZ, LOUIS

 Address
 P.O. BOX 380157
 Address
 P.O. BOX 380157

 City-State-Zip:
 MURDOCK FL 33938
 City-State-Zip:
 MURDOCK FL 33938

Title TREASURER Title FOUNDATION CHAIR
Name FINING, BARBARA Name HAWKER, BRETT
Address P.O. BOX 380157 Address PO BOX 380157

City-State-Zip: MURDOCK FL 33938 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 04/11/2023

Officer/Director Detail Continued:

Title DIRECTOR

Name REYNOLDS, CARA

Address PO BOX 380157

City-State-Zip: MURDOCK FL 33938

Title VP

Name MAYMON, CHERYL 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

Title SECRETARY

Name THORNTON-MAIN, SHERRY

Address P.O. BOX 380157

City-State-Zip: MURDOCK FL 33938

Title PRESIDENT

Name NENADOVICH, TAMMY

Address P.O. BOX 380157

City-State-Zip: MURDOCK FL 33938

Title DIRECTOR

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