

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N49202

**Entity Name:** HEALTHY START COALITION OF ORANGE COUNTY, INC.

**Current Principal Place of Business:**

600 COURTLAND STREET  
SUITE #565  
ORLANDO, FL 32804

**Current Mailing Address:**

600 COURTLAND STREET  
SUITE #565  
ORLANDO, FL 32804 US

**FEI Number:** 59-3125675

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SUTHERLAND, LINDA  
600 COURTLAND STREET  
SUITE #565  
ORLANDO, FL 32804 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title C  
Name JOSEPHS, LAUREN DR.  
Address 976 LAKE BALDWIN LANE  
SUITE 203  
City-State-Zip: ORLANDO FL 32714  
  
Title VC  
Name MAYRA, URIBE  
Address 5319 LAKE JESSAMINE DRIVE  
City-State-Zip: ORLANDO FL 32829

Title S  
Name GAIL, GARVIN  
Address 2494 CASTLEWOOD ROAD  
City-State-Zip: MAITLAND FL 32751  
  
Title T  
Name ROBINSON, EVERS DR.  
Address 1521 HIGH GROVE WAY  
City-State-Zip: ORLANDO FL 32818

*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:** LAUREN JOSEPHS

**CHAIR**

**02/24/2015**

Electronic Signature of Signing Officer/Director Detail

Date