

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N51292

**Entity Name:** VOLUNTEERS OF AMERICA COMMUNITY HOUSING AND DEVELOPMENT CORPORATION OF BROWARD, INC.

**FILED**  
**Jan 07, 2020**  
**Secretary of State**  
**7221080308CC**

**Current Principal Place of Business:**

405 CENTRAL AVE STE 100  
ST PETERSBURG, FL 33701

**Current Mailing Address:**

405 CENTRAL AVE STE 100  
ST PETERSBURG, FL 33701 US

**FEI Number: 58-2030721**

**Certificate of Status Desired: No**

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

STRINGFELLOW, JANET M  
405 CENTRAL AVE STE 100  
ST PETERSBURG, FL 33701 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: JANET M. STRINGFELLOW**

**01/07/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           PRESIDENT/CEO  
Name           STRINGFELLOW, JANET M  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title           T  
Name           SHEPHERDSON, EDWIN A  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title           SECRETARY  
Name           HARVEY, MAURICE R DR.  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title           CHAIRMAN  
Name           HOUSSIAN, DAVID  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title           VC  
Name           BUENO, ALEX  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title           DIRECTOR  
Name           GUTIERREZ, HELEN  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title           DIRECTOR  
Name           WISE, DON W  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title           DIRECTOR  
Name           TABANO, STEPHEN  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

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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: JANET M. STRINGFELLOW**

**PRESIDENT/CEO**

**01/07/2020**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name WHITAKER, ALLISON  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR  
Name GOODWIN, THOMAS  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR  
Name EVANS, MELODY  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR  
Name RUNYON, KENT  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701