2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000272

Entity Name: VOLUNTEERS OF AMERICA OF FLORIDA, INC.

FILED
Jan 07, 2020
Secretary of State
6844998070CC

Current Principal Place of Business:

405 CENTRAL AVE STE 100 ST. PETERSBURG. FL 33701-3866

Current Mailing Address:

405 CENTRAL AVE STE 100

ST. PETERSBURG, FL 33701-3866 US

FEI Number: 58-1856992 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

STRINGFELLOW, JANET M 405 CENTRAL AVE STE 100 ST. PETERSBURG, FL 33701-3866 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 Title TREASURER

NameSTRINGFELLOW, JANET MNameSHEPHERDSON, EDWIN A.Address405 CENTRAL AVE STE 100Address405 CENTRAL AVE STE 100

City-State-Zip: ST. PETERSBURG FL 33701-3866 City-State-Zip: ST. PETERSBURG FL 33701-3866

Title VC Title DIRECTOR

Name BUENO, ALEX Name GUTIERREZ, HELEN

Address 405 CENTRAL AVE STE 100 Address 405 CENTRAL AVE STE 100

City-State-Zip: ST. PETERSBURG FL 33701-3866 City-State-Zip: ST. PETERSBURG FL 33701-3866

Title CHAIRMAN Title DIRECTOR

Name HOUSSIAN, DAVID Name TABANO, STEPHEN

Address 405 CENTRAL AVE STE 100 Address 405 CENTRAL AVE STE 100

City-State-Zip: ST. PETERSBURG FL 33701-3866 City-State-Zip: ST. PETERSBURG FL 33701-3866

Title DIRECTOR Title SECRETARY

Name ANDERSEN, KRISTIN Name HARVEY, MAURICE DR.

Address 405 CENTRAL AVE STE 100 Address 405 CENTRAL AVE STE 100

City-State-Zip: ST. PETERSBURG FL 33701-3866 City-State-Zip: ST. PETERSBURG FL 33701-3866

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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 PRESID

PRESIDENT/CEO

01/07/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name TUTWILER-WHITAKER, ALLISON

Address 405 CENTRAL AVE STE 100

City-State-Zip: ST. PETERSBURG FL 33701-3866

Title DIRECTOR

Name GOODWIN, THOMAS

Address 405 CENTRAL AVE STE 100

City-State-Zip: ST. PETERSBURG FL 33701-3866

Title DIRECTOR

Name RUNYON, KENT

Address 405 CENTRAL AVE STE 100

City-State-Zip: ST. PETERSBURG FL 33701-3866

Title DIRECTOR

Name EVANS, MELODY

Address 405 CENTRAL AVE STE 100

City-State-Zip: ST. PETERSBURG FL 33701-3866

Title DIRECTOR

Name KITCHINGS, HAROLD T DR.
Address 405 CENTRAL AVE STE 100

City-State-Zip: ST. PETERSBURG FL 33701-3866