2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N93000004328

Entity Name: VOLUNTEERS OF AMERICA OF MIAMI, INC.

FILED
Aug 17, 2022
Secretary of State
6034045489CC

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: 72-1248954 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

08/17/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

City-State-Zip:

Title	PRESIDENT/CEO	Title	CHAIRMAN

Name STRINGFELLOW, JANET M Name HARVEY, MAURICE

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

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

Title DIRECTOR Title VC

Name WHITAKER, ALLISON Name GOODWIN, THOMAS

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

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

Title DIRECTOR Title TREASURER

Name VIAMONTES, BETTY Name EVANS, MELODY

Address 405 CENTRAL AVE Address 405 CENTRAL AVE STE 100

SUITE 100 City-State-Zip: ST PETERSBURG FL 33701

Title SECRETARY

Title DIRECTOR Name MESA, IVAN

NameREYNOLDS, SPENCERAddress405 CENTRAL AVE STE 100Address405 CENTRAL AVE STE 100City-State-Zip:ST PETERSBURG FL 33701

City-State-Zip: ST PETERSBURG FL 33701

ST PETERSBURG FL 33701

Continues on page 2

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

08/17/2022

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name BOWMAN, THOMAS Name THROWER, DEBORAH

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

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

Title DIRECTOR Title DIRECTOR

Name RIGG, KHARY Name MALISZEWSKI, KENNETH

Address 405 CENTRAL AVE Address 405 CENTRAL AVENUE

SUITE 100 SUITE 100

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