

**2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N93000004328

**Entity Name:** VOLUNTEERS OF AMERICA OF MIAMI, INC.

**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

11/22/2021

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            VC  
Name            HARVEY, MAURICE  
Address        405 CENTRAL AVE STE 100  
City-State-Zip: ST PETERSBURG FL 33701

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

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

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

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

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

Title            DIRECTOR  
Name            MESA, IVAN  
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 AND CEO

11/22/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

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

Title DIRECTOR  
Name RIGG, KHARY  
Address 405 CENTRAL AVE  
SUITE 100  
City-State-Zip: ST. PETERBURG FL 33701

Title DIRECTOR  
Name THROWER, DEBORAH  
Address 405 CENTRAL AVE STE 100  
City-State-Zip: ST. PETERSBURG FL 33701-3866

Title DIRECTOR  
Name MALISZEWSKI, KENNETH  
Address 405 CENTRAL AVENUE  
SUITE 100  
City-State-Zip: ST. PETERSBURG FL 33701