

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 12, 2021
Secretary of State
1781693501CC

Entity Name: LIFELINE FAMILY CENTER, INC.

Current Principal Place of Business:

907 SE 5TH AVE
CAPE CORAL, FL 33990

Current Mailing Address:

907 SE 5TH AVE
CAPE CORAL, FL 33990 US

FEI Number: 65-0529641

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DELUCA, MEGHAN
907 SE 5TH AVE
CAPE CORAL, FL 33990 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/B	Title	VC/B
Name	HILLORE, CHERYL	Name	ATKINS, FRED
Address	5799 HARBOUR CIR.	Address	3040 OASIS GRAND BLVD #1101
City-State-Zip:	CAPE CORAL FL 33914	City-State-Zip:	FORT MYERS FL 33916
Title	TREASURER	Title	DIRECTOR
Name	ALVAREZ, BRITNEY	Name	MONTGOMERY, BARBARA
Address	3734 SW 8TH COURT #102	Address	4104 SE 20TH PL APT. B2
City-State-Zip:	CAPE CORAL FL 33914	City-State-Zip:	CAPE CORAL FL 33904
Title	DIRECTOR	Title	DIRECTOR
Name	BOYE, JAIME	Name	GRAHAM, CHERYL
Address	3815 SE 13TH AVE	Address	34 NW 25TH TER
City-State-Zip:	CAPE CORAL FL 33904	City-State-Zip:	CAPE CORAL FL 33903
Title	PRESIDENT	Title	DIRECTOR
Name	DELUCA, MEGHAN	Name	BENNETT, TIMOTHY
Address	4121 NW 34TH LANE	Address	2517 SHELBY PARKWAY
City-State-Zip:	CAPE CORAL FL 33993	City-State-Zip:	CAPE CORAL FL 33904

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: MEGHAN DELUCA

PRESIDENT

02/12/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name CHAPMAN, MARY-CLAIRE DR.
Address 1203 SW 57TH STREET
City-State-Zip: CAPE CORAL FL 33914