## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#717665** 

FILED Mar 15, 2011 Secretary of State

Entity Name: CHARLOTTE COUNTY HEALTH PLUS COMMUNITY ACTION, INC.

Current Principal Place of Business: New Principal Place of Business:

3082 TAMIAMI TRAIL

PORT CHARLOTTE, FL 33952

Current Mailing Address: New Mailing Address:

P.O. BOX 494037

PORT CHARLOTTE, FL 339494037 US

US

FEI Number: 59-1358912 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ERETH, HENRY 551 ROYAL POINCIANA PUNTA GORDA, FL 33955

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

**OFFICERS AND DIRECTORS:** 

Title: PRES

Name: ERETH, HENRY
Address: 551 ROYAL POINCIANA
City-St-Zip: PUNTA GORDA, FL 33955

Title: DVP

Name: MOCNY, RICHARD

Address: 2002 BAL HARBOR BLVD #821 City-St-Zip: PUNTA GORDA, FL 33950

Title: SECY

Name: LYNCH, NORMA

Address: 255 KENSINGTON STREET
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: TREA

Name: TODD, SANDRA

Address: 233 EAST TARPON BLVD City-St-Zip: PORT CHARLOTTE, FL 33952

Title:

 Name:
 GLORIUS, MARTHA

 Address:
 2395 HARBOR BLVD. # 302

 City-St-Zip:
 PORT CHARLOTTE, FL 33952

Title: [

 Name:
 ARNOLDT, ROSEMARIE

 Address:
 1822 ROCKLAND RD.

 City-St-Zip:
 PORT CHARLOTTE, FL 33980

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: HENRY ERETH PRES 03/15/2011