

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750099

FILED  
Jan 08, 2008  
Secretary of State

**Entity Name:** FLORIDA COALITION AGAINST DOMESTIC VIOLENCE, INC.

**Current Principal Place of Business:**

425 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

**Current Mailing Address:**

425 OFFICE PLAZA DRIVE  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

**FEI Number:** 59-2055476      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CARR, TIFFANY  
425 OFFICE PLAZA  
TALLAHASSEE, FL 32301 US

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

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 ( ) Delete  
Name: CATINO, KATHY  
Address: PO BOX 10102  
City-St-Zip: NAPLES, FL 34101 US

Title: 1VP ( ) Delete  
Name: HARRISON, THERESA  
Address: PO BOX 5099  
City-St-Zip: GAINESVILLE, FL 32627

Title: 2VPD ( ) Delete  
Name: WARREN, MF  
Address: PO BOX 142  
City-St-Zip: DAYTONA BEACH, FL 32115

Title: RS ( ) Delete  
Name: SILER, ELLEN  
Address: PO BOX 4909  
City-St-Zip: JACKSONVILLE, FL 32201

Title: CEO ( ) Delete  
Name: CARR, TIFFANY  
Address: 425 OFFICE PLAZA  
City-St-Zip: TALLAHASSEE, FL 32301

Title: PPD ( ) Delete  
Name: FAGAN, DONNA  
Address: PO BOX 1028  
City-St-Zip: LAKE CITY, FL 32056

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: HARRISON, THERESA  
Address: PO BOX 5099  
City-St-Zip: GAINESVILLE, FL 32627 US

Title: 1VP (X) Change ( ) Addition  
Name: LYNCH, LAUREL  
Address: PO BOX 1624  
City-St-Zip: BRADENTON, FL 34206

Title: 2VPD (X) Change ( ) Addition  
Name: SILER, ELLEN  
Address: PO BOX 4909  
City-St-Zip: JACKSONVILLE, FL 32201

Title: RS (X) Change ( ) Addition  
Name: RIFFEY, SHANDRA  
Address: PO BOX 16287  
City-St-Zip: FERNANDINA BEACH, FL 32035

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TREA (X) Change ( ) Addition  
Name: WARREN, MF  
Address: PO BOX 142  
City-St-Zip: DAYTONA BEACH, FL 32115

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TIFFANY A. CARR

CEO

01/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date