

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009387

FILED  
Jan 12, 2007  
Secretary of State

**Entity Name:** DOMESTIC VIOLENCE COORDINATING COUNCIL, INC.

**Current Principal Place of Business:**

P.O. BOX 20910  
TALLAHASSEE, FL 32316

**New Principal Place of Business:**

11077 WILDLIE TRAIL  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

11077 WILDLIFE TRAIL  
TALLAHASSEE, FL 32312

**New Mailing Address:**

**FEI Number:** 56-2408785

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'ROURKE, KELLY E  
11077 WILDLIFE TRAIL  
TALLAHASSEE, FL 32312 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: C ( ) Delete  
Name: MABRY, MICHELLE  
Address: P.O. BOX 20910  
City-St-Zip: TALLAHASSEE, FL 32316

Title: C ( ) Delete  
Name: CRAWFORD, MARTHA ANN  
Address: P.O. BOX 20910  
City-St-Zip: TALLAHASSEE, FL 32312

Title: S ( ) Delete  
Name: O'ROURKE, KELLY  
Address: 11077 WILDLIFE TRAIL  
City-St-Zip: TALLAHASSEE, FL 32312

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

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

Title: T ( ) Change (X) Addition  
Name: LAZARUS, MARK  
Address: P.O. BOX 20910  
City-St-Zip: TALLAHASSEE, FL 32312

I hereby certify that the information supplied with this filing does not qualify for the 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: KELLY O'ROURKE

SEC

01/12/2007

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

\_\_\_\_\_  
Date