

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004530

FILED
Apr 25, 2012
Secretary of State

Entity Name: COALITION ON AGING, TRANSITIONS AND TECHNOLOGY, INC.

Current Principal Place of Business:

3433 WINTER LAKE ROAD
LAKELAND, FL 33803

New Principal Place of Business:

439 S. FLORIDA AVE
LAKELAND, FL 33801

Current Mailing Address:

3433 WINTER LAKE ROAD
LAKELAND, FL 33803

New Mailing Address:

439 S. FLORIDA AVE
LAKELAND, FL 33801

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

Name and Address of Current Registered Agent:

DARBY, TIMOTHY
500 SOUTH FLORIDA AVE., SUITE 520
LAKELAND, FL 33801 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: D
Name: BOYCE, PATRICIA
Address: 1335 ROBINHOOD LANE SOUTH
City-St-Zip: LAKELAND, FL 33813

Title: D
Name: BURDETTE, CHARLES
Address: 330 WEST WELLINGTON DRIVE
City-St-Zip: LAKELAND, FL 33813

Title: D
Name: DARBY, TIMOTHY
Address: P.O. BOX 2971
City-St-Zip: LAKELAND, FL 338062971

Title: D
Name: DUBOSE, AMY
Address: 3221 PINE CLUB DRIVE
City-St-Zip: LAKELAND, FL 33566

Title: D
Name: JONES, GLENN
Address: P.O. BOX 93158
City-St-Zip: LAKELAND, FL 33804

Title: D
Name: LAMM, ROSEMARIE
Address: 5602 LAKE POINT DRIVE
City-St-Zip: LAKELAND, FL 33813

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: ROSMARIE LAMM

D

04/25/2012

Electronic Signature of Signing Officer or Director

Date