

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N27811

FILED  
Jan 23, 2006  
Secretary of State

**Entity Name:** SEMINOLE COUNTY VICTIM'S RIGHTS COALITION, INC.

**Current Principal Place of Business:**

613 E. 1ST STREET  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2921  
SANFORD, FL 32772 US

**New Mailing Address:**

**FEI Number:** 59-2934243

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GOLD, JEANNE  
631 E. 1ST STREET  
SANFORD, FL 32771 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: PD ( ) Delete  
Name: VANDE LOO, FRANK  
Address: 2066 RIVER PARK BLVD.  
City-St-Zip: ORLANDO, FL 32817

Title: SD ( ) Delete  
Name: DAVIS, JANET  
Address: 1519 S GREENLEAF CT  
City-St-Zip: SORRENTO, FL 32776

Title: ED ( ) Delete  
Name: GOLD, JEANNE  
Address: 1100 E. FIRST ST., STE. 1  
City-St-Zip: SANFORD, FL 32722

Title: TD ( ) Delete  
Name: HORST, ERIC  
Address: 5360 LAKE BLUFF DRIVE  
City-St-Zip: SANFORD, FL 32771

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

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: JEANNE GOLD

ED

01/23/2006

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

\_\_\_\_\_  
Date