2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 18, 2011
Secretary of State

DOCUMENT# N45972

Entity Name: HOMELESS FAMILY CENTER, INC.

Current Principal Place of Business:

720 4TH STREET
VERO BEACH, FL 32962 US

New Principal Place of Business:

Current Mailing Address:

715 4TH PL
VERO BEACH, FL 32962 US

New Mailing Address:

FEI Number: 59-3129752 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KEENAN, JULIA T
715 4TH PLACE
VERO BEACH, FL 32962 US

Name and Address of New Registered Agent:

COYLE, DONALD L
715 4TH PLACE
VERO BEACH, FL 32962 US

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: D. LORNE COYLE 01/18/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: KROSS, DAN
Address: 9345 FRANGIPANI DRIVE
City-St-Zip: VERO BEACH, FL 32963

Title: TD
Name: BOLINGER, ADAM
Address: 2006 SURFSIDE TERRACE
City-St-Zip: VERO BEACH, FL 32963

Title: SD
Name: MAYO, LIZ
Address: 620 REEF RD
City-St-Zip: VERO BEACH, FL 32963

Title: EDD
Name: COYLE, DONALD L
Address: 715 4TH PLACE
City-St-Zip: VERO BEACH, FL 32962

Title: VD
Name: SOBKOWIAK, ROGER
Address: 537 44TH AVENUE SW
City-St-Zip: VERO BEACH, FL 32962

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: D. LORNE COYLE EDD 01/18/2011
Electronic Signature of Signing Officer or Director Date