## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000006139

FILED Jan 07, 2010 Secretary of State

Entity Name: CHARLOTTE COUNTY HEALTHY START COALITION, INC.

Current Principal Place of Business: New Principal Place of Business:

17940 TOLEDO BLADE BLVD.

**UNIT A** 

PORT CHARLOTTE, FL 33948 US

Current Mailing Address: New Mailing Address:

17940 TOLEDO BLADE BLVD.

UNIT A

PORT CHARLOTTE, FL 33948 US

FEI Number: 65-0727055 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

KRAUS, NANCY T EX.DIR. 17940 TOLEDO BLADE BLVD. UNIT A

PORT CHARLOTTE, FL 33948 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: C

 Name:
 MAYS, SHARON MRS

 Address:
 514 EAST GRACE STREET

 City-St-Zip:
 PUNTA GORDA, FL 33950

Title: VC

Name: TAGTOW, DOROTHY MRS
Address: 2500 HARBOR BLVD.

City-St-Zip: PORT CHARLOTTE, FL 33952

Title:

 Name:
 MIZELL, JOHN MR

 Address:
 331 SULLIVAN ST.

 City-St-Zip:
 PUNTA GORDA, FL 33950

Title: T

Name: SLOAN, HELENA MRS
Address: 3028 CARING WAY, #4
City-St-Zip: PORT CHARLOTTE, FL 33952

Title:

Name: HERIGODT, ANDY MRS

Address: 1210 OAK ST City-St-Zip: ARCADIA, FL 34266

Title: [

 Name:
 CLARKE, MARCIA MRS

 Address:
 P. O. BOX 510963

 City-St-Zip:
 PUNTA GORDA, FL 33950

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: NANCY T. KRAUS CEO 01/07/2010