

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700121

FILED
Mar 02, 2018
Secretary of State
CC4836082345

Entity Name: ABILITIES, INC. OF FLORIDA

Current Principal Place of Business:

2735 WHITNEY ROAD
CLEARWATER, FL 33760

Current Mailing Address:

2735 WHITNEY ROAD
CLEARWATER, FL 33760 US

FEI Number: 59-0874493

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

THOMAS, GENE
2735 WHITNEY ROAD
CLEARWATER, FL 33760 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

Officer/Director Detail :

Title	D	Title	DIRECTOR
Name	BRUGGEMAN, JACK	Name	SOROTA, JOSEPH
Address	1429 FILENE COURT	Address	29750 US HIGHWAY 19 N., SUITE 200
City-State-Zip:	VIENNA VA 22182	City-State-Zip:	CLEARWATER FL 33761
Title	DIRECTOR	Title	DIRECTOR
Name	HAYWOOD, VERDIA L	Name	LEE, MICHELLE S
Address	2701 VERILY COURT	Address	99 CANAL CENTER PLAZA 500
City-State-Zip:	OAKTON VA 22124	City-State-Zip:	ALEXANDRIA VA 22314
Title	DIRECTOR	Title	DIRECTOR
Name	BURKE, FRANK	Name	CARROLL, JAMES
Address	29750 US HIGHWAY 19 NORTH	Address	3950 UNIVERSITY DRIVE, #300
City-State-Zip:	CLEARWATER FL 33761	City-State-Zip:	FAIRFAX VA 22030
Title	DIRECTOR	Title	DIRECTOR
Name	CINTRON, CHRISTINE	Name	PLATTNER, PAUL
Address	301 NORTH WALNUT STREET, 18TH FLOOR	Address	3137 CALVERT BOULEVARD
City-State-Zip:	WILMINGTON DE 19801	City-State-Zip:	LUSBY MD 20657

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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: JOSEPH SOROTA

DIRECTOR

03/02/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name RUFENACHT, JULIE
Address 1308 FORT BRAGG ROAD, SUITE 201
City-State-Zip: FAYETTEVILLE NC 28305

Title DIRECTOR
Name LEAVELLE, KARLA
Address 126 15TH AVENUE NE
City-State-Zip: ST PETERSBURG FL 33704

Title DIRECTOR
Name SWINDELL, JENNIFER
Address 8283 GREENSBORO DRIVE
City-State-Zip: MCLEAN VA 22102

Title PRESIDENT & CHIEF EXECUTIVE OFFICER
Name SAMUELSON, JANET
Address 10467 WHITE GRANITE DRIVE
City-State-Zip: OAKTON VA 22124

Title EXECUTIVE VICE PRESIDENT & CHIEF
FINANCIAL OFFICER
Name HODGE, DAVID
Address 10467 WHITE GRANITE DRIVE
City-State-Zip: OAKTON VA 22124

Title DIRECTOR
Name THIEBERGER, PAUL
Address 10811 HARLEY ROAD
City-State-Zip: LORTON VA 22079

Title DIRECTOR
Name PORTMAN, ROBIN
Address 2315 SAWDUST ROAD
City-State-Zip: VIENNA VA 22181

Title DIRECTOR
Name CACCETTA, KELLY
Address 425 3RD STREET, S. W. SUITE 700
City-State-Zip: WASHINGTON DC 20024

Title EXECUTIVE VICE PRESIDENT &
CHIEF OPERATING OFFICER
Name PATTERSON, BRUCE
Address 10467 WHITE GRANITE DRIVE
City-State-Zip: OAKTON VA 22124

Title CORPORATE SECRETARY,
EXECUTIVE VICE PRESIDENT &
CHIEF STRATEGY OFFICER
Name HALL, MARK
Address 10467 WHITE GRANITE DRIVE
City-State-Zip: OAKTON VA 22124