

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 707340

**Entity Name:** THE FLORIDA COUNCIL ON CRIME AND DELINQUENCY, INC.

**FILED**  
**Jan 15, 2020**  
**Secretary of State**  
**7730220835CC**

**Current Principal Place of Business:**

3151 NW 111TH ST  
GAINESVILLE, FL 32606-5250

**Current Mailing Address:**

PO BOX 399  
ORANGE PARK, FL 32067-0399 US

**FEI Number: 59-1665573**

**Certificate of Status Desired: No**

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

LINGIS, ROBERT A  
3151 NW 111TH ST  
GAINESVILLE, FL 32606-5250 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: ROBERT A LINGIS**

**01/15/2020**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LIDDLE, SHELLEY  
Address        PO BOX 399  
City-State-Zip: ORANGE PARK FL 32067-0399

Title            EXECUTIVE SECRETARY  
Name            LINGIS, ROBERT  
Address        PO BOX 399  
City-State-Zip: ORANGE PARK FL 32067-0399

Title            PRESIDENT-ELECT  
Name            STARLING, CAROL  
Address        PO BOX 399  
City-State-Zip: ORANGE PARK FL 32067-0399

Title            TREASURER  
Name            SIMS, ALICE  
Address        PO BOX 399  
City-State-Zip: ORANGE PARK FL 32067-0399

Title            SECRETARY  
Name            BANASCO, RAUL  
Address        PO BOX 399  
City-State-Zip: ORANGE PARK FL 32067-0399

*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: ROBERT LINGIS**

**EXECUTIVE SECRETARY    01/15/2020**

Electronic Signature of Signing Officer/Director Detail

Date