

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

DOCUMENT# N00000004640

**Entity Name:** TREASURE COAST HOMELESS SERVICES COUNCIL, INC.

**Current Principal Place of Business:**

2525 ST LUCIE AVENUE  
VERO BEACH, FL 32960

**Current Mailing Address:**

2525 ST LUCIE AVENUE  
VERO BEACH, FL 32960 US

**FEI Number:** 52-2254571

**Certificate of Status Desired:** Yes

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

HUBBARD, LOUISE S  
2525 ST. LUCIE AVE.  
VERO BEACH, FL 32960 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 C  
Name HECKMAN, TODD  
Address 1717 INDIAN RIVER BLVD. # 301  
City-State-Zip: VERO BEACH FL 32960

Title T  
Name COYLE, LORNE  
Address 2525 ST LUCIE AVENUE  
City-State-Zip: VERO BEACH FL 32960

Title V  
Name HUBBARD, LOUISE  
Address 2525 ST. LUCIE AVENUE  
City-State-Zip: VERO BEACH FL 32960

Title S  
Name COCOVES, ANITA  
Address 472 S.E. EDGEWOOD DRIVE  
City-State-Zip: STUART FL 34996

*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:** LOUISE HUBBARD

**VICE PRESIDENT**

**03/19/2020**

Electronic Signature of Signing Officer/Director Detail

Date