

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000008150

**FILED**  
**Apr 21, 2015**  
**Secretary of State**  
**CC4263701032**

**Entity Name:** FLORIDA SUPPORTIVE HOUSING COALITION, INC.

**Current Principal Place of Business:**

76 SOUTH LAURA STREET  
303  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

P.O. BOX 11242  
TALLAHASSEE, FL 32302 US

**FEI Number:** 26-0021281

**Certificate of Status Desired:** No

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

NAZWORTH, SHANNON P  
76 SOUTH LAURA STREET  
303  
JACKSONVILLE, FL 32202 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 P  
Name NAZWORTH, SHANNON  
Address 76 SOUTH LAURA STREET  
303  
City-State-Zip: JACKSONVILLE FL 32202

Title TREASURER  
Name HAMER, JANET  
Address PO BOX 11242  
City-State-Zip: TALLAHASSEE FL 32302

Title V  
Name GOLIK, OLGA  
Address 4175 WEST 20 AVE  
City-State-Zip: HIALEAH FL 33012

Title S  
Name DREGGORS, WAYNE  
Address 919 E. 2ND STREET  
City-State-Zip: SANFORD FL 32770

*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:** SHANNON NAZWORTH

**PRESIDENT**

**04/21/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date