

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008150

Entity Name: FLORIDA SUPPORTIVE HOUSING COALITION, INC.**Current Principal Place of Business:**3740 BEACH BLVD
304
JACKSONVILLE, FL 32207**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:**SUTTON, STEPHANIE
2914 TYRON CIRCLE
TALLAHASSEE, FL 32309 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:** STEPHANIE SUTTON

03/29/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	NAZWORTH, SHANNON
Address	3740 BEACH BLVD 304
City-State-Zip:	JACKSONVILLE FL 32207

Title	TREASURER
Name	HAMER, JANET
Address	MCFL3-066; 1060 W INTERNATIONAL SPEEDWAY BLVD
City-State-Zip:	DAYTONA BEACH FL 32114

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

Title	SECRETARY
Name	BARCUS, MARIA
Address	2857 CHANCERY LANE
City-State-Zip:	CLEARWATER FL 33759

Title	DIRECTOR
Name	HUMBURG, JACK
Address	445 31ST STREET NORTH
City-State-Zip:	ST. PETERSBURG FL 33713

Title	PRESIDENT
Name	NEWSON, SANDRA
Address	155 SOUTH MIAMI AVE S 850
City-State-Zip:	MIAMI FL 33131

Title	DIRECTOR
Name	BROWN-WOOFER, MELANIE
Address	316 E. PARK AVENUE
City-State-Zip:	TALLAHASSEE FL 32301

Title	VP
Name	MORGAN, SUSAN
Address	5707 N. 22ND STREET
City-State-Zip:	TAMPA FL 33610

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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: STEPHANIE SUTTON**EXECUTIVE DIRECTOR**

03/29/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GRAN-PUCKETT, JILL
Address 28 ENDEVOR DR
City-State-Zip: PANACEA FL 32346

Title DIRECTOR
Name ARADANAS, AUDREY
Address 3250 SW 3TD AVE
FL 2
City-State-Zip: MIAMI FL 33129

Title DIRECTOR
Name GIESE, GAYLE
Address 1800 E. OAK KNOLL CIR.
City-State-Zip: DAVIE FL 33324

Title DIRECTOR
Name CAMPBELL, TOM
Address 920 NW 7TH AVENUE
City-State-Zip: FT. LAUDERDALE FL 33311

Title DIRECTOR
Name LEDESMA, JOHN
Address 100 N TAMPA STREET
City-State-Zip: TAMPA FL 33602

Title DIRECTOR
Name MELENDI, CHUCK
Address 2540 WEST PALM DRIVE
City-State-Zip: TAMP FL 33629

Title DIRECTOR
Name SACINO, LEEANNE
Address P.O. BOX 60614
City-State-Zip: PALM BAY FL 32906

Title DIRECTOR
Name STRINGFELLOW, JANET
Address 200 2ND AVE S
PMB #436
City-State-Zip: SAINT PETERSBURG FL 33701

Title DIRECTOR
Name KELLY, NATALIE
Address 122 S. CALHOUN ST.
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name LASA, ALEX
Address 8301 NW 27TH AVE, APT 411
City-State-Zip: MIAMI FL 33147

Title DIRECTOR
Name MCCABE, JAMES
Address 2400 EAST COMMERCIAL
BOULEVARD
SUITE 525
City-State-Zip: FT. LAUDERDALE FL 33308

Title CEO
Name SUTTON, STEPHANIE
Address 2914 TYRON CIRCLE
City-State-Zip: TALLAHASSEE FL 32309