

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008150

FILED
Mar 21, 2017
Secretary of State
CC3717399879

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 MCFL3-066; 1060 W INTERNATIONAL
SPEEDWAY BLVD
City-State-Zip: DAYTONA BEACH FL 32114

Title V
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 CORDIAL, GAIL
Address 8186 GLENMORE DRIVE
City-State-Zip: TALLAHASSEE FL 32312

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

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

Title DIRECTOR
Name FARMER, DANA
Address 2473 CARE DRIVE SUITE 200
City-State-Zip: TALLAHASSEE FL 32308

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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: SHANNON NAZWORTH

PRESIDENT

03/21/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FONTAINE, MARK
Address 2868 MAHAN DRIVE SUITE 1
City-State-Zip: TALLAHASSEE FL 32308

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

Title DIRECTOR
Name GRIFFIN, TOM
Address 3000 5TH STREET
City-State-Zip: ST. CLOUD FL 34769

Title DIRECTOR
Name GOODEN-HILL, CORETTA
Address 215 TADCASTER COURT
City-State-Zip: ST. JOHNS FL 32259

Title DIRECTOR
Name BEATON, JOY
Address 2807 N. TAMIAMI TRAIL
City-State-Zip: SARASOTA FL 34234

Title DIRECTOR
Name WYCHE, DONNA
Address 2002A MICHIGAN STREET
City-State-Zip: ORLANDO FL 32806

Title DIRECTOR
Name WICKHAM, MARK
Address 7524 PLANTHE ROAD
City-State-Zip: NEW PORT RITCHEY FL 34653

Title DIRECTOR
Name DOW, JOHN
Address 7425 SW 140 TERRACE
City-State-Zip: MIAMI FL 33158