

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02580

Entity Name: COUNSELLING & RESOURCE CENTER FOR WOMEN & FAMILIES, INC.

FILED
Apr 11, 2018
Secretary of State
CC6924120620

Current Principal Place of Business:

11403 SE US HIGHWAY 301
BELLEVIEW, FL 34420

Current Mailing Address:

PO BOX 1358
BELLEVIEW, FL 34421 US

FEI Number: 59-2522150

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEST, CAROLYN H
11403 SE US HIGHWAY 301
BELLEVIEW, FL 34420 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 CEO
Name WEST, CAROLYN H
Address 300 SW 36TH PLACE
City-State-Zip: OCALA FL 34471

Title P
Name WEST, CAROLYN H
Address 300 SW 36TH PLACE
City-State-Zip: OCALA FL 34471

Title S
Name WILSON, KARLA
Address 1965 SE 73 LOOP
City-State-Zip: OCALA FL 34480

Title D
Name SIMPSON, JOHN
Address 1210 SE 15TH AVENUE
City-State-Zip: OCALA FL 34474

Title D
Name ALEXANDER, SELINA
Address 6501 NW 67TH TERRACE
City-State-Zip: OCALA FL 34482

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: CAROLYN H WEST

P

04/11/2018

Electronic Signature of Signing Officer/Director Detail

Date