

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000002340

**Entity Name:** CLIFFORD HILL COMMUNITY OUTREACH CENTER, INC.

**Current Principal Place of Business:**

1303 E. NEW ORLEANS AVE.  
TAMPA, FL 33603

**Current Mailing Address:**

PO BOX 17795  
TAMPA, FL 33682 US

**FEI Number:** 20-1254337

**Certificate of Status Desired:** No

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

DAVIS, OVIDA  
713 E MADISON ST  
PLANT CITY, FL 33563 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	Title	VP, TREASURER
Name	DAVIS, OVIDA	Name	PRIDGEN, HELEN
Address	713 E MADISON ST	Address	PO BOX 82768
City-State-Zip:	PLANT CITY FL 33563	City-State-Zip:	TAMPA FL 33682

*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:** OVIDA DAVIS

**PRESIDENT**

**04/04/2017**

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

\_\_\_\_\_  
Date