

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000513

Entity Name: FAMILY COURT PROFESSIONAL COLLABORATIVE, INC.**Current Principal Place of Business:**C/O PIPER HAWKINS & COMPANY
330 S. PINEAPPLE AVE #106
SARASOTA, FL 34236**Current Mailing Address:**C/O PIPER HAWKINS & COMPANY
330 S. PINEAPPLE AVE 106
SARASOTA, FL 34236 US**FEI Number:** 20-4162468**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WAILAND, CHRISTOPHER T
C/O PIPER HAWKINS & COMPANY
330 S. PINEAPPLE AVE 106
SARASOTA, FL 34236 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:** CHRISTOPHER T. WAILAND

01/15/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	T
Name	WAILAND, CHRISTOPHER T
Address	C/O PIPER HAWKINS & COMPANY 330 S. PINEAPPLE AVE #106
City-State-Zip:	SARASOTA FL 34236

Title	V
Name	SANKES, JOSH
Address	2 NORTH TAMIAMI TRAIL 804
City-State-Zip:	SARASOTA FL 34236

Title	P
Name	ROTH, STEPHANIE
Address	7313 MERCHANT COURT
City-State-Zip:	LAKEWOOD RANCH FL 34202

Title	S
Name	HOYLE, SHAUN
Address	301 MISTY HAVEN DRIVE
City-State-Zip:	GROVELAND FL 34736

Title	ASST. SECRETARY
Name	CROSS, MICHELLE
Address	6497 PARKLAND DRIVE SUITE F
City-State-Zip:	SARASOTA FL 34243

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: CHRISTOPHER T WAILAND**TREASURER**

01/15/2020

Electronic Signature of Signing Officer/Director Detail

Date