2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 07, 2020
Secretary of State
5614253674CC

DOCUMENT# N06000009760

Entity Name: FLORIDA CHILDREN'S SERVICES COUNCIL, INC.

Current Principal Place of Business:

1126 LEE AVENUE
TALLAHASSEE, FL 32303

Current Mailing Address:

1126 LEE AVENUE
TALLAHASSEE, FL 32303 US

FEI Number: 30-0395267

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUSE, MATTHEW CEO
1126 LEE AVENUE
TALLAHASSEE, FL 32303 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: MATTHEW GUSE 02/07/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CHAIRMAN
Name	HEATON, DAVID
Address	101 SE CENTRAL PARKWAY
City-State-Zip:	STUART FL 34994

Title	DIRECTOR
Name	HAJ, JAMES R
Address	3150 SW 3RD AVENUE, 8TH FLOOR
City-State-Zip:	MIAMI FL 33137

Title	CEO
Name	GUSE, MATTHEW
Address	1126 LEE AVENUE
City-State-Zip:	TALLAHASSEE FL 32303

Title	SECRETARY
Name	PEPPERS, JOE
Address	1095 A PHILIP RANDOLPH BLVD
City-State-Zip:	JACKSONVILLE FL 32206

Title	TREASURER
Name	BOYLE, SEAN
Address	546 NW UNIVERSITY BLVD. SUITE 201
City-State-Zip:	PORT ST. LUCIE FL 34986

Title	VC
Name	WILLIAMS-TAYLOR, LISA
Address	2300 HIGH RIDGE ROAD
City-State-Zip:	BOYNTON BEACH FL 33426

Title	DIRECTOR
Name	ARENBERG SELTZER, CINDY
Address	6600 W COMMERCIAL BLVD
City-State-Zip:	LAUDERHILL FL 33319

Title	DIRECTOR
Name	FORD, SUSAN
Address	1112 MANATEE AVENUE WEST
City-State-Zip:	BRADENTON FL 34205

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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: MATTHEW GUSE CEO 02/07/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	PARRIS, KELLEY
Address	1002 E PALM AVE
City-State-Zip:	TAMPA FL 33605

Title	DIRECTOR
Name	MURPHY, COLIN
Address	218 SE 24TH ST
City-State-Zip:	GAINESVILLE FL 32641