

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009760

**Entity Name:** FLORIDA CHILDREN'S SERVICES COUNCIL, INC.**Current Principal Place of Business:**111 N. GADSDEN STREET  
SUITE 300  
TALLAHSSEE, FL 32301**Current Mailing Address:**111 N. GADSDEN STREET  
SUITE 300  
TALLAHSSEE, FL 32301**FEI Number:** 30-0395267**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUSE, MATTHEW CEO  
111 N. GADSDEN STREET  
SUITE 300  
TALLAHSSEE, FL 32301 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

04/02/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                                    |
|-----------------|------------------------------------|
| Title           | VC                                 |
| 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, MATT                         |
| Address         | 111 N. GADSDEN STREET<br>SUITE 300 |
| City-State-Zip: | TALLAHSSEE FL 32301                |
| Title           | DIRECTOR                           |
| Name            | PEPPERS, JOE                       |
| Address         | 1095 A PHILIP RANDOLPH BLVD        |
| City-State-Zip: | JACKSONVILLE FL 32206              |

|                 |                                      |
|-----------------|--------------------------------------|
| Title           | SECRETARY                            |
| Name            | BOYLE, SEAN                          |
| Address         | 546 NW UNIVERSITY BLVD.<br>SUITE 201 |
| City-State-Zip: | PORT ST. LUCIE FL 34986              |
| Title           | TREASURER                            |
| Name            | WILLIAMS-TAYLOR, LISA                |
| Address         | 2300 HIGH RIDGE ROAD                 |
| City-State-Zip: | BOYNTON BEACH FL 33426               |
| Title           | CHAIRMAN                             |
| Name            | CINDY, ARENBERG                      |
| Address         | 6600 W COMMERCIAL BLVD               |
| City-State-Zip: | LUDE RHILL FL 33319                  |
| Title           | DIRECTOR                             |
| Name            | FORD, SUSAN                          |
| Address         | 1112 MANATEE AVENUE WEST             |
| City-State-Zip: | BRADENTON FL 34205                   |

*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

04/02/2019

Electronic Signature of Signing Officer/Director Detail

Date