**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**
**Apr 15, 2016**
**Secretary of State**
**CC3413494980**

DOCUMENT# N07000003710

**Entity Name:** VCSO CHARITY COMMITTEE, INC.

**Current Principal Place of Business:**

250 N BEACH STREET ROOM 117
DAYTONA BEACH, FL 32114

**Current Mailing Address:**

250 N BEACH STREET ROOM 117
DAYTONA BEACH, FL 32114

**FEI Number: 20-8855181**

**Certificate of Status Desired:** Yes

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

BERTOLAMI, THOMAS
250 N BEACH STREET ROOM 117
DAYTONA BEACH, FL 32114 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 |
| Name | HEATON, DON |
| Address | 250 N BEACH STREET ROOM 117 |
| City-State-Zip: | DAYTONA BEACH FL 32114 |

| | |
|---|---|
| Title | VP |
| Name | WESTFALL, ERIC |
| Address | 250 N BEACH STREET ROOM 117 |
| City-State-Zip: | DAYTONA BEACH FL 32114 |

| | |
|---|---|
| Title | S |
| Name | WEBSTER, TIM |
| Address | 250 N BEACH STREET ROOM 117 |
| City-State-Zip: | DAYTONA BEACH FL 32114 |

| | |
|---|---|
| Title | T |
| Name | BERTOLAMI, THOMAS |
| Address | 250 N BEACH STREET ROOM 117 |
| City-State-Zip: | DAYTONA BEACH FL 32114 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | JOHNSON, BEN F |
| Address | 250 N BEACH ST ROOM 117 |
| City-State-Zip: | DAYTONA BEACH FL 32114 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | BRANNON, DAVE |
| Address | 250 N BEACH STREET ROOM 117 |
| City-State-Zip: | DAYTONA BEACH FL 32114 |

| | |
|---|---|
| Title | DIRECTOR |
| Name | SELTZER, MATTHEW |
| Address | 250 N BEACH STREET ROOM 117 |
| City-State-Zip: | DAYTONA BEACH FL 32114 |

*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: THOMAS BERTOLAMI TREASURER 04/15/2016

Electronic Signature of Signing Officer/Director Detail — Date