

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000396

Entity Name: SISTER CITY PROGRAM OF COCOA FLORIDA, INC.**Current Principal Place of Business:**1263 ST. ANDREWS CR.
ROCKLEDGE, FL 32955**Current Mailing Address:**PO BOX 560933
ROCKLEDGE, FL 32955 US**FEI Number:** 27-1676020**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MOORE, HAL
322 SCENIC DRIVE
COCOA, FL 32926 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:** HAL MOORE

01/07/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|-----------------------------|
| Title | P |
| Name | WHITE, BOB |
| Address | PO BOX 560933 |
| City-State-Zip: | ROCKLEDGE FL 32955 |
| Title | ASSOCVP |
| Name | OLSHANSKY, SANDY RABBI |
| Address | 3810 MURRELL RD., SUITE 129 |
| City-State-Zip: | ROCKLEDGE FL 32955 |
| Title | T |
| Name | WHITE, NANCY |
| Address | PO BOX 560933 |
| City-State-Zip: | ROCKLEDGE FL 32955 |
| Title | D |
| Name | MARDIROSIAN, KATHY |
| Address | 3702 WINDSOR |
| City-State-Zip: | COCOA FL 32926 |

| | |
|-----------------|--------------------------|
| Title | SRVP |
| Name | MOORE, HAL |
| Address | 322 SCENIC DR. |
| City-State-Zip: | COCOA FL 32926 |
| Title | S |
| Name | FIORENTINO, KRISHA |
| Address | 15 S. FERNWOOD DR. |
| City-State-Zip: | ROCKLEDGE FL 32955 |
| Title | D |
| Name | VAN DEN BOOGAARD, DIANA |
| Address | 735 ATLANTIC DR. |
| City-State-Zip: | SATELLITE BEACH FL 32937 |
| Title | D |
| Name | LACY, DAPHNE |
| Address | 417 BREVARD AVE. |
| City-State-Zip: | COCOA FL 32926 |

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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: HAL MOORE**SENIOR VICE PRESIDENT** 01/07/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name FISHKIN, JEFF
Address 173 LAS PALMAS
City-State-Zip: MERRITT ISLAND FL 32953

Title D
Name MOORE, MARY
Address 322 SCENIC DR.
City-State-Zip: COCOA FL 32926

Title D
Name EMENEGGER, DONNIE
Address 4105 EDWARDS ST.
City-State-Zip: MELBOURNE FL 32901

Title D
Name MILES, THERESA
Address 1498 STAFFORD AVE.
City-State-Zip: MERRITT ISLAND FL 32952

Title D
Name PERLMAN, HEIDI
Address 5790 RUSACK DRIVE
City-State-Zip: MELBOURNE FL 32940

Title D
Name SHELTON, RON
Address 4260 HARVEST CR.
City-State-Zip: ROCKLEDGE FL 32955

Title D
Name SHELTON, SHELBY
Address 4260 HARVEST CR.
City-State-Zip: ROCKLEDGE FL 32955

Title D
Name ALLEN, LENNIE
Address 93 DELANNOY AVE., APT. 902
City-State-Zip: COCOA FL 32922

Title D
Name PERLMAN, ERIC
Address 5790 RUSACK DRIVE
City-State-Zip: MELBOURNE FL 32940

Title D
Name BRYAN, PATTI
Address 3330 PERKINSON LANE
City-State-Zip: MERRITT ISLAND FL 32953