

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001763

Entity Name: SOUTH SHORE COALITION FOR MENTAL HEALTH & AGING, INC.

FILED
Feb 07, 2025
Secretary of State
8548470908CC

Current Principal Place of Business:

101 TRINITY LAKES DRIVE
SUITE NO. 254
SUN CITY CENTER, FL 33573

Current Mailing Address:

101 TRINITY LAKES DRIVE
SUITE 254
SUN CITY CENTER, FL 33573 US

FEI Number: 27-5125682

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SPROW, MICHELLE
101 TRINITY LAKES DR
SUITE 254
SUN CITY CENTER, FL 33573 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: MICHELLE SPROW

02/07/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PRESIDENT
Name	SPROW, MICHELLE
Address	16925 CLEAR CORK DRIVE
City-State-Zip:	WIMAUMA FL 33598
Title	OTHER
Name	CANEEN, DEBBIE
Address	101 TRINITY LAKES DR SUITE 254
City-State-Zip:	SUN CITY CENTER FL 33573

Title	TREASURER
Name	CAMPBELL, TOM
Address	202 FLAMINGO DR
City-State-Zip:	APOLLO BEACH FL 33572
Title	VP
Name	BAYRUNS, JANICE
Address	920 GOLF ISLAND DR
City-State-Zip:	APOLLO BEACH FL 33572

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: MICHELLE SPROW

PRESIDENT

02/07/2025

Electronic Signature of Signing Officer/Director Detail

Date