

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004530

FILED
Jan 15, 2020
Secretary of State
4286527639CC

Entity Name: COALITION ON AGING, TRANSITIONS AND TECHNOLOGY, INC.

Current Principal Place of Business:

801 SOUTH FLORIDA AVE
SUITE 3
LAKELAND, FL 33803

Current Mailing Address:

5602 LAKE POINT DR.
LAKELAND, FL 33813 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LAMM, ROSEMARIE SANTORA PHD
5602 LAKE PT. DR.
LAKELAND, FL 33813 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: ROSEMARIE SANTORA LAMM

01/15/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BURDETTE, CHARLES
Address 330 WEST WELLINGTON DRIVE
City-State-Zip: LAKELAND FL 33813

Title EXECUTIVE DIRECTOR, .
Name LAMM, ROSEMARIE SANTORA PHD
Address 5602 LAKE PT. DR.
City-State-Zip: LAKELAND FL 33813

Title DIRECTOR
Name ANDREW, CROSSFIELD
Address 801 SOUTH FLORIDA AVE
SUITE 3
City-State-Zip: LAKELAND FL 33803

Title DIRECTOR
Name HOLLIS, MARYLEE
Address 141 FAIRCHILD STREET
City-State-Zip: BABSON PARK FL 33827

Title DIRECTOR
Name DUBOSE, AMY
Address 530 SOUTH FLORIDA AVE
City-State-Zip: LAKELAND FL 33801

Title TREASURER
Name BAGLEY, GAIL
Address 1021 LAKELAND HILLS BLVD.
City-State-Zip: LAKELAND FL 33805

Title DIRECTOR
Name CAGE, BARBARA
Address 801 SOUTH FLORIDA AVE
SUITE 3
City-State-Zip: LAKELAND FL 33803

Title SECRETARY
Name BERKEN, JEAN
Address 801 SOUTH FLORIDA AVE
SUITE 3
City-State-Zip: LAKELAND FL 33803

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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: ROSEMARIE LAMM

EXECUTIVE DIRECTOR

01/15/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MCCRORY, SANDRA
Address 801 SOUTH FLORIDA AVE
 SUITE 3
City-State-Zip: LAKELAND FL 33803