

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004530

FILED
Feb 13, 2017
Secretary of State
CC6736618742

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

Current Principal Place of Business:

1021 LAKELAND HILLS BLVD
2ND FLOOR
LAKELAND, FL 33805

Current Mailing Address:

1021 LAKELAND HILLS BLVD
2ND FLOOR
LAKELAND, FL 33805 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

02/13/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name BOYCE, PATRICIA
Address 1335 ROBINHOOD LANE SOUTH
City-State-Zip: LAKELAND FL 33813

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 PRESIDENT
Name RAPETTI, ARMAND
Address 1220 BRIGHTON WAY
City-State-Zip: LAKELAND FL 33813

Title DIRECTOR
Name STERN, GLORIA
Address 2954 MISSION LAKES DRIVE
City-State-Zip: LAKELAND FL 33803

Title VP
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 DIRECTOR
Name GRADY, LYNN
Address 1282 LAKE POINT DRIVE
City-State-Zip: LAKELAND FL 33813

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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 S. LAMM

EXECUTIVE DIRECTOR

02/13/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name BAGLEY, GAIL
Address 902 SOUTH FLORIDA AVE
City-State-Zip: LAKELAND FL 33803