2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2021
Secretary of State
6554188381CC

DOCUMENT# N11000011873

Entity Name: COMMUNITY ACTION STOPS ABUSE FOUNDATION, INC.

Current Principal Place of Business:

1011 FIRST AVE. N.
ST. PETERSBURG, FL 33705

Current Mailing Address:

P.O. BOX 414
ST. PETERSBURG, FL 33731

FEI Number: 45-4485786

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

HELLER, SAMUEL J
HELLER LAW, PLLC
695 CENTRAL AVE
ST PETERSBURG, FL 33701 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: SAMUEL J. HELLER 03/10/2021

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CHAIRMAN
Name	DAWSON, MARK
Address	1011 1ST AVE N
City-State-Zip:	ST PETERSBURG FL 33705

Title	SECRETARY
Name	HEYMAN, ROBERT
Address	1011 1ST AVE N
City-State-Zip:	ST PETERSBURG FL 33705

Title	CEO
Name	FORSYTHE, LARIANA
Address	1011 1ST AVE N
City-State-Zip:	ST PETERSBURG FL 33705

Title	DIRECTOR
Name	KING, SHELIA
Address	1011 FIRST AVE. N.
City-State-Zip:	ST. PETERSBURG FL 33705

Title	VC
Name	CLARK, BRIAN
Address	1011 1ST AVE N
City-State-Zip:	ST PETERSBURG FL 33705

Title	TREASURER
Name	GOODMAN, HARVEY
Address	1011 1ST AVE N
City-State-Zip:	ST PETERSBURG FL 33705

Title	CFO
Name	FOREY, MINDY
Address	1011 FIRST AVE. N.
City-State-Zip:	ST. PETERSBURG FL 33705

Title	DIRECTOR
Name	KRAUSE, JEAN
Address	1011 FIRST AVE. N.
City-State-Zip:	ST. PETERSBURG FL 33705

Continues on page 2

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: MINDY FOREY CFO 03/10/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MAGERAS, DAN
Address	1011 FIRST AVE. N.
City-State-Zip:	ST. PETERSBURG FL 33705