

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19452

FILED
Apr 29, 2016
Secretary of State
CC4194148222

Entity Name: COALITION FOR THE HOMELESS OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

639 WEST CENTRAL BLVD.
ORLANDO, FL 32801

Current Mailing Address:

639 WEST CENTRAL BLVD.
ORLANDO, FL 32801 US

FEI Number: 59-2814255

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TROTTER, BRENT A.
639 W CENTRAL BLVD
ORLANDO, FL 32801 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name STEPHENS, III, SAMUEL C.
Address ZOM, INC.
2001 SUMMIT PARK DRIVE SUITE 300
City-State-Zip: ORLANDO FL 32810

Title VC
Name SPENCER, DOUGLAS M
Address SPENCER CONSULTING SERVICES
5604 LAKE MARY JESS SHORES
COURT
City-State-Zip: ORLANDO FL 32839

Title PRESIDENT/CEO
Name TROTTER, BRENT A
Address 639 W CENTRAL BLVD.
City-State-Zip: ORLANDO FL 32801

Title TREASURER, & CHAIR-FINANCE
Name WILLIS, MINDY
Address ORLANDO UTILITIES COMMISSION
PO BOX 3193
City-State-Zip: ORLANDO FL 32802-3193

Title SECRETARY
Name BROCKMAN, CHRISTOPHER C.
Address HOLLAND & KNIGHT, LLP
200 S ORANGE AVENUE SUITE 2600
City-State-Zip: ORLANDO FL 32801

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: BRENT TROTTER

PRESIDENT

04/29/2016

Electronic Signature of Signing Officer/Director Detail

Date