

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19452

FILED
Mar 28, 2013
Secretary of State
CC9059820095

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 CD
Name BAKER, TIMOTHY R
Address 189 S ORANGE AVE STE 1700
City-State-Zip: LAKE BUENA VISTA FL 32830

Title VCD
Name SCHIMMELPFENNING, RANDY E.
Address 20 N. ORANGE AVE 16TH FLR
City-State-Zip: ORLANDO FL 32801

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

Title TD
Name BUWALDA, BRIAN P
Address 420 S ORANGE AVE, STE 500
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 A. TROTTER

PRESIDENT/CEO

03/28/2013

Electronic Signature of Signing Officer/Director Detail

Date