

2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N19452

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

Current Principal Place of Business:

18 NORTH TERRY AVENUE
ORLANDO, FL 32801-2211

Current Mailing Address:

PO BOX 3467
ORLANDO, FL 32802-3467 US

FEI Number: 59-2814255

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KRALL, ALLISON
18 N. TERRY AVE
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: ALLISON KRALL

01/07/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER, & CHAIR-FINANCE
Name CHURCHILL, JACQUELINE
Address JACKI CHURCHILL CPA LLC
City-State-Zip: ORLANDO FL

Title C
Name TEBBE-SHEMELYA, JANE
Address 11413 LAKE BUTLER BLVD
City-State-Zip: WINDERMERE FL 34786

Title VC
Name WAHL, RICHARD C
Address 189 S. ORANGE AVE - STE. 2020
City-State-Zip: ORLANDO FL 32801

Title S
Name GAULT-LEWIS, KRIS
Address DR. PHILLIP CENTER 445 S.
 MAGNOLIA AVE
City-State-Zip: ORLANDO FL 32801

Title PCEO
Name KRALL, ALLISON M
Address 18 N. TERRY AVE
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: ALLISON KRALL

CEO

01/07/2021

Electronic Signature of Signing Officer/Director Detail

Date