

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22633

**Entity Name:** THE ESCAROSA COALITION ON THE HOMELESS INC.

**Current Principal Place of Business:**

2601 W STRONG ST  
PENSACOLA, FL 32505

**Current Mailing Address:**

P.O. BOX 17222  
PENSACOLA, FL 32522 US

**FEI Number: 59-2909065**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

GOODSPEED, DENIS  
2601 W. STRONG STREET  
PENSACOLA, FL 32502 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 P  
Name BARBER, KAREN PHD  
Address 2601 W. STRONG STREET  
City-State-Zip: PENSACOLA FL 32502

Title V  
Name STRADER, GREGORY D  
Address 1301 W GOVERNMENT  
City-State-Zip: PENSACOLA FL 32502

Title T  
Name COURT, STACIE L  
Address 56 EAST CHASE ST  
City-State-Zip: PENSACOLA FL 32591

Title S  
Name ROGERS, BOB  
Address 2601 W STRONG ST  
City-State-Zip: PENSACOLA FL 32505

*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: KAREN BARBER, PHD**

**PRESIDENT**

**02/11/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date