

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N42651

**Entity Name:** ADVOCATES FOR CHILDREN AND FAMILIES, INC.

**Current Principal Place of Business:**

16831 NE 6TH AVE  
N MIAMI BCH, FL 33162

**Current Mailing Address:**

16831 NE 6TH AVE  
N MIAMI BCH, FL 33162 US

**FEI Number:** 65-0254656

**Certificate of Status Desired:** Yes

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

LAMARCHE, ROBERT C.  
16831 NE 6TH AVE  
N MIAMI BCH, FL 33162 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:** ROBERT C. LAMARCHE

02/09/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name ALLEN, GINGER  
Address 1421 NW 122 AVE  
City-State-Zip: PEMBROKE PINES FL 33026

Title DRA  
Name LAMARCHE, ROBERT C.  
Address 3216 NW 22ND AVENUE  
City-State-Zip: OAKLAND PARK FL 33309

Title DIRECTOR  
Name SHNEIDER, GARY  
Address 4915 PELICAN ST.  
City-State-Zip: COCONUT CREEK FL 33073

Title DIRECTOR, VP  
Name GARCIA-HALENAR, ALEJANDRO  
Address 3108 W. HARBOR VIEW AVENUE  
City-State-Zip: TAMPA FL 33611

Title DIRECTOR, SECRETARY,  
TREASURER  
Name WATSON, AMANDA  
Address 14223 SUNRIDGE BLVD  
City-State-Zip: WINTER GARDEN FL 34787

Title DIRECTOR  
Name GARCIA, VANESSA  
Address 820 CORTEZ STREET  
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR, PRESIDENT  
Name VOGEL, JOHN  
Address 6273 NW 40TH WAY  
City-State-Zip: COCONUT CREEK FL 33073

Title D  
Name BURDICK, JOSHUA  
Address 6530 VIRGINIA AVE  
City-State-Zip: ATLANTA GA 30306

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*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:** ROBERT LAMARCHE

DIRECTOR, RA

02/09/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name VORWERK, LINDA  
Address 604 BLUE RIDGE DR  
City-State-Zip: COLUMBIA TN 38401

Title D  
Name MCGIBON, JENNIFER  
Address 2500 S. FERN ST  
City-State-Zip: ARLINGTON VA 22202