

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005643

Entity Name: CHARLOTTE COMMUNITY FOUNDATION, INC.**Current Principal Place of Business:**227 SULLIVAN STREET
PUNTA GORDA, FL 33950**Current Mailing Address:**227 SULLIVAN STREET
PUNTA GORDA, FL 33950 US**FEI Number:** 65-0455319**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCCRORY LAW FIRM, PL
309 TAMiami TRAIL
PUNTA GORDA, FL 33950 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:** A. JILL. C. MCCRORY

03/27/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CHAIR
Name	MCCRORY, JILL
Address	227 SULLIVAN STREET
City-State-Zip:	PUNTA GORDA FL 33950

Title	SECRETARY
Name	WASHBURN, JANE A.
Address	227 SULLIVAN STREET
City-State-Zip:	PUNTA GORDA FL 33950

Title	VC
Name	BENNETT, LEW
Address	227 SULLIVAN STREET
City-State-Zip:	PUNTA GORDA FL 33950

Title	TREASURER
Name	SAVASUK, KIM
Address	227 SULLIVAN STREET
City-State-Zip:	PUNTA GORDA FL 33950

Title	CHIEF ACCOUNTING MANAGER
Name	HERRON, SUZANNE
Address	227 SULLIVAN STREET
City-State-Zip:	PUNTA GORDA FL 33950

Title	CFO
Name	HERRON, SUZANNE
Address	227 SULLIVAN STREET
City-State-Zip:	PUNTA GORDA FL 33950

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: SUZANNE HERRON

CFO

03/27/2019

Electronic Signature of Signing Officer/Director Detail

Date