

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90188 029 ****61.25

DOCUMENT # 764401	
1. Entity Name REGION NO. 16 OF AFTCA, INC.	



Principal Place of Business 155 EAST 21ST STREET JACKSONVILLE, FL 32206 US	Mailing Address 155 EAST 21ST STREET JACKSONVILLE, FL 32206 US
9707 Oak Hammock Trail Jacksonville, FL 32256	

60036348



2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04112007 Chg-NP CR2E037 (12/06)

4. FEI Number 59-2215732	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
MILTON, JOHN 155 EAST 21ST STREET JACKSONVILLE, FL 32206 9707 Oak Hammock Trail Jacksonville, FL 32256	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	DATE
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Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	PRICE, DON
STREET ADDRESS	7541 MOTES RD
CITY - ST - ZIP	BRYCEVILLE, FL 32009
TITLE	P
NAME	MILTON, JOHN
STREET ADDRESS	155 EAST 21ST STREET 9707 Oak Hammock Trail
CITY - ST - ZIP	JACKSONVILLE, FL 32206 32256
TITLE	DST
NAME	HOLLEY, CHAD
STREET ADDRESS	6102 CO. RD 37
CITY - ST - ZIP	HOPE HALL, AL 31043
TITLE	D
NAME	WEAVER, LUKE
STREET ADDRESS	PO BOX 3950
CITY - ST - ZIP	JACKSON, GA 30233
TITLE	2VPD
NAME	STALLINGS, RICK
STREET ADDRESS	P.O. DRAWER 70040
CITY - ST - ZIP	MONTGOMERY, AL 36107
TITLE	D
NAME	COPELAND, LARRON
STREET ADDRESS	1031 SPEIR ROAD
CITY - ST - ZIP	BRONWOOD, GA 31726

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>John Milton</i>	April 11, 2007 (904) 355-1781
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