2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07452

FILED Mar 27, 2012 Secretary of State

Entity Name: FAMILY NETWORK ON DISABILITIES OF FLORIDA, INC.

New Principal Place of Business: Current Principal Place of Business:

2196 MAIN ST. SUITE K

DUNEDIN, FL 34698

Current Mailing Address: New Mailing Address:

2196 MAIN ST. SUITE K

DUNEDIN, FL 34698

FEI Number: 59-2679597 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

LABELLE, RICHARD LABELLE, RICHARD 2735 WHITNEY ROAD 2196 MAIN ST.

CLEARWATER, FL 33760 US SUITE K

DUNEDIN', FL 34698 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: 03/27/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

STEWART, TRACY Name: Address: 9518 RAPTOR COURT City-St-Zip: TALLAHASSEE, FL 32309

Title:

Name: MORGAN-BYRD, JENNIFER Address: 6260 OLD BAINBRIDGE RD City-St-Zip: TALLAHASSEE, FL 32303

Title:

FONTAINE, NANCY Name: Address: 7940 BERNARD ST. City-St-Zip: TALLAHASSEE, FL 32317

Title:

Name: SHAW, JULIE 29 PRIVACY LANE Address: City-St-Zip: PALM COAST, FL 32164

Title:

HARDING II, JAMES Name:

6027 OX BOTTOM MANOR DR Address: TALLAHASSEE, FL 32312 City-St-Zip:

Title:

TCHOURIOUKANOVA, KATIA Name: Address: 2530 MARSTON ROAD TALLAHASSEE, FL 32308 City-St-Zip:

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: JENNIFER MORGAN-BYRD **PRES** 03/27/2012