2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2016
Secretary of State
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Entity Name: CAPITAL AREA COMMUNITY ACTION AGENCY, INC.

Current Principal Place of Business:

309 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301

Current Mailing Address:

309 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301

FEI Number: 59-1117362

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CENTER, TIMOTHY J ESQ.
309 OFFICE PLAZA DR.
TALLAHASSEE, FL 32301 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: TIMOTHY J CENTER 04/04/2016

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TD
Name	WIENKE, BRANDON
Address	3522 THOMASVILLE RD SUITE 500
City-State-Zip:	TALLAHASSEE FL 32309

Title	CHIEF FISCAL OFFICER
Name	DEAN, A K
Address	309 OFFICE PLAZA DRIVE
City-State-Zip:	TALLAHASSEE FL 32301

Title	MEMBER AT LARGE
Name	MANUEL, PAMELA O
Address	850 CANTON CIRCLE APT 11
City-State-Zip:	TALLAHASSEE FL 32303

Title	SECRETARY
Name	ROSS, HAROLD
Address	309 OFFICE PLAZA DR.
City-State-Zip:	TALLAHASSEE FL 32301

Title	COB
Name	LANIER, CHARLEAN M
Address	309 OFFICE PLAZA DRIVE
City-State-Zip:	TALLAHASSEE FL 32301

Title	VCOB
Name	THOMPSON, CHERYL
Address	164 CENTER ST.
City-State-Zip:	PANACEA FL 32346

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: DEAN, A K CHIEF FISCAL OFFICER 04/04/2016

Electronic Signature of Signing Officer/Director Detail — Date