

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711041

Entity Name: APALACHEE CENTER, INC.

Current Principal Place of Business:

2634 CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

Current Mailing Address:

2634 CAPITAL CIRCLE NE
BUILDING J
TALLAHASSEE, FL 32308 US

FEI Number: 59-1162148

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

REEVE, JAY
2634 CAPITAL CIRCLE NE
BUILDING J
TALLAHASSEE, FL 32308 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name REEVE, JAY
Address 2634 CAPITAL CIRCLE NE
BUILDING J
City-State-Zip: TALLAHASSEE FL 32308

Title VP, TREAS
Name KELLY, VIRGINIA H
Address 2634 CAPITAL CIRCLE NE
BUILDING J
City-State-Zip: TALLAHASSEE FL 32308

Title D
Name HOSFORD, KENNETH
Address 2634 CAPITAL CIRCLE NE
BUILDING J
City-State-Zip: TALLAHASSEE FL 32308

Title D
Name FLEET, EDWIN
Address 2634 CAPITAL CIRCLE NE
BUILDING J
City-State-Zip: TALLAHASSEE FL 32308

Title D
Name DAVIS, FORREST J
Address 2634 CAPITAL CIRCLE NE
BUILDING J
City-State-Zip: TALLAHASSEE FL 32308

Title VP, S
Name CONGER, SUE
Address 2634 CAPITAL CIRCLE NE
BUILDING J
City-State-Zip: TALLAHASSEE FL 32308

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: VIRGINIA H. KELLY

CFO, VP

02/24/2014

Electronic Signature of Signing Officer/Director Detail

Date