2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2014
Secretary of State
CC0355662592

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Entity Name: WASHINGTON COUNTY COUNCIL ON AGING, INC

Current Principal Place of Business:

1348 SOUTH BLVD.
CHIPLEY, FL 32428

Current Mailing Address:

1348 SOUTH BLVD.
CHIPLEY, FL 32428 US

FEI Number: 59-1485912

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH, MARY LE.D.
1348 SOUTH BLVD.
CHIPLEY, FL 32428 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	PD
Name	WILLIAM PEACOCK
Address	1592 CLARK CIRCLE
City-State-Zip:	CHIPLEY FL 32428

Title	D
Name	RAY, MARLENE
Address	819 3RD STREET
City-State-Zip:	CHIPLEY FL 32428

Title	D
Name	STUKEY, JANICE
Address	1595 NEARING HILLS CIRCLE
City-State-Zip:	CHIPLEY FL 32428

Title	DIRECTOR
Name	OWEN, LAUREN
Address	2058 OLD BONIFAY ROAD
City-State-Zip:	CHIPLEY FL 32428

Title	VPD
Name	LAUREN OWEN
Address	2058 OLD BONIFAY ROAD
City-State-Zip:	CHIPLEY FL 32428

Title	S
Name	JANICE STUKEY
Address	1595 NEARING HILLS ROAD
City-State-Zip:	CHIPLEY FL 32428

Title	DIRECTOR
Name	HINSON, MARTY
Address	1299 JULIE LANE
City-State-Zip:	CHIPLEY FL 32428

Title	DIRECTOR
Name	PRESCOTT, EDWARD
Address	791 CHANCE ROAD
City-State-Zip:	CHIPLEY FL 32428

Continues on page 2

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: MARY L. SMITH — EXECUTIVE DIRECTOR — 03/12/2014

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	TOWNSEND, JEANETTE
Address	P.O. BOX 308
City-State-Zip:	CHIPLEY FL 32428

Title	DIRECTOR
Name	STEVENSON, CALVIN
Address	3163 RIVER ROAD
City-State-Zip:	VERNON FL 32462

Title	DIRECTOR
Name	TILLER, EVENLYN
Address	887 MAIN STREET
City-State-Zip:	CHIPLEY FL 32428

Title	PASTOR
Name	GUY, JAMES
Address	1844 PETTIS ROAD
City-State-Zip:	CHIPLEY FL 32428

Title	DIRECTOR
Name	MILES, BILLY
Address	307 COPE ROAD
City-State-Zip:	CHIPLEY FL 32428

Title	DIRECTOR
Name	BROWN, MILTON
Address	3399 MALLORY ROAD
City-State-Zip:	VERNON FL 32462

Title	DIRECTOR
Name	WILLIAMS, GEORGE
Address	P.O. BOX 94
City-State-Zip:	CHIPLEY FL 32428