

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 729251

Entity Name: THE ARC OF PUTNAM COUNTY, INC.**Current Principal Place of Business:**1209 WESTOVER DR
PALATKA, FL 32177-5329**Current Mailing Address:**1209 WESTOVER DR
PALATKA, FL 32177-5329 US**FEI Number: 59-1550224****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**WHITTAKER, JIM
1209 WESTOVER DR
PALATKA, FL 32177 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 VP
Name MERRITT, CATHY
Address 116 HUMMINGBIRD LANE
City-State-Zip: PALATKA FL 32177Title SD
Name FLATTER, SHARON
Address 104 POINT WEST DRIVE
City-State-Zip: PALATKA FL 32177Title PD
Name DAVIS, LEANNE
Address 792 LAKE SHORE TERRACE
City-State-Zip: INTERLACHEN FL 32148Title TREASURER
Name NORWOOD, JAMES
Address PO BOX 2441
City-State-Zip: PALATKA FL 32178Title PD, PRESIDENT
Name SLOAN, PRESTON B
Address 256 HWY 17 W
City-State-Zip: PALATKA FL 32178-0161Title D
Name WESTBURY, RICHARD
Address 286 ROUND LAKE ROAD
City-State-Zip: PALATKA FL 32177Title D
Name MILLER, MELISSA
Address 5001 ST JOHNS AVE
City-State-Zip: PALATKA FL 32177

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: JIM WHITTAKER**CHIEF EXECUTIVE
OFFICER****02/23/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date