2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751255

Entity Name: ONEBLOOD FOUNDATION, INC.

Current Principal Place of Business:

Current Principal Place of Business

10100 DR MARTIN L KING JR ST N SAINT PETERSBURG, FL 33716-3806

Current Mailing Address:

10100 DR MARTIN L KING JR ST N SAINT PETERSBURG. FL 33716-3806 US

FEI Number: 59-2216675 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

F & L CORP. ONE INDEPENDENT DRIVE SUITE 1300 JACKSONVILLE, FL 32202-5017 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: MICHAEL A. OKATY, PARTNER

03/18/2014

FILED Mar 18, 2014

Secretary of State

CC1576583544

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

TitleCEO, PRESIDENTTitleSECRETARY, TREASURERNameMURPHY, JOHNNameDODDRIDGE, DONALD D

Address 10100 DR MARTIN L KING JR ST N Address 10100 DR MARTIN L KING JR ST N

City-State-Zip: SAINT PETERSBURG FL 33716-3806 City-State-Zip: SAINT PETERSBURG FL 33716-3806

Title DIRECTOR Title DIRECTOR

Name DODDRIDGE, DONALD D Name LANGFORD, ALLEN W

Address 10100 DR MARTIN L KING JR ST N Address 10100 DR MARTIN L KING JR ST N

City-State-Zip: SAINT PETERSBURG FL 33716-3806 City-State-Zip: SAINT PETERSBURG FL 33716-3806

Title DIRECTOR

Name OKATY, MICHAEL A

SIGNATURE: JOHN MURPHY

Address 10100 DR MARTIN L KING JR ST N
City-State-Zip: SAINT PETERSBURG FL 33716-3806

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.

CFO

Electronic Signature of Signing Officer/Director Detail

03/18/2014

Date