2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765372

Entity Name: ALLEGANY FRANCISCAN MINISTRIES, INC.

FILED Apr 01, 2019 **Secretary of State** 6410950437CC

Current Principal Place of Business:

33920 US HWY 19 N

269

PALM HARBOR, FL 34684

Current Mailing Address:

33920 US HWY 19 N

269

PALM HARBOR, FL 34684 US

FEI Number: 58-1492325 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COOGAN, EILEEN 33920 US HWY 19 N

269

PALM HARBOR, FL 34684 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: EILEEN COOGAN 04/01/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT, CEO Title SECRETARY Name COOGAN, EILEEN S Name DAWSON, JOAN 33920 US HWY 19 N 33920 US HWY 19 N Address Address

City-State-Zip: PALM HARBOR FL 34684

GORSKI, PETER Name

33920 US HWY 19 N Address

269

City-State-Zip: PALM HARBOR FL 34684

DIRECTOR

Title **CHAIR**

Title

WATTS, HOWARD Name 33920 US HWY 19 N Address

269

City-State-Zip: PALM HARBOR FL 34684

Title VICE CHAIR

Name IVERY, EMERY Address 33920 US HWY 19 N

#269

City-State-Zip: PALM HARBOR FL 34684

269

City-State-Zip: PALM HARBOR FL 34684

Title **DIRECTOR**

Name KANE, DONNA

Address 33920 US HWY 19 N

269

City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR

WEIDENBORNER, MARLENE Name

33920 US HWY 19 N Address

269

City-State-Zip: PALM HARBOR FL 34684

Title **DIRECTOR**

Name CORREA. RUSSELL

Address 33920 US HWY 19 N

#269

PALM HARBOR FL 34684 City-State-Zip:

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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: EILEEN COOGAN Electronic Signature of Signing Officer/Director Detail PRESIDENT & CEO

04/01/2019

Officer/Director Detail Continued:

Title DIRECTOR

Name DILLON, MARY ANN Address 33920 US HWY 19 N

#269

City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR

Name WILLIAMS, JEANNE Address 33920 US HWY 19 N

269

City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR

Name CHIARELLO, NANCY

Address 33920 US HWY 19 N SUITE 269

City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR

Name WRIGHT, MABEL KATRINA
Address 33920 US HWY 19 N, STE 269
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR

Name HALL, ARLEASE

Address 33920 US HWY 19 N

269

City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR

Name BANKS, TREVOR

Address 33920 US HWY 19 N SUITE 269

City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR

Name PLOTNER, LAURA

Address 33920 US HWY 19 N SUITE 269

City-State-Zip: PALM HARBOR FL 34684