

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765372

Entity Name: ALLEGANY FRANCISCAN MINISTRIES, INC.

FILED
Mar 18, 2021
Secretary of State
9514801836CC

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

03/18/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, CEO
Name COOGAN, EILEEN S
Address 33920 US HWY 19 N
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR
Name DAWSON, JOAN
Address 33920 US HWY 19 N
 # 269
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR
Name GORSKI, PETER
Address 33920 US HWY 19 N
 # 269
City-State-Zip: PALM HARBOR FL 34684

Title CHAIRMAN
Name IVERY, EMERY
Address 33920 US HWY 19 N
 #269
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR
Name CORREA, RUSSELL
Address 33920 US HWY 19 N
 #269
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR
Name DILLON, MARY ANN
Address 33920 US HWY 19 N
 #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 WILLIAMS, JEANNE
Address 33920 US HWY 19 N
 # 269
City-State-Zip: PALM HARBOR FL 34684

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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

PRESIDENT & CEO

03/18/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name BANKS, TREVOR
Address 33920 US HWY 19 N SUITE 269
City-State-Zip: PALM HARBOR FL 34684

Title SECRETARY
Name PLOTNER, LAURA
Address 33920 US HWY 19 N SUITE 269
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR
Name MATTHEWS, CINDY
Address 33920 US HWY 19 N
269
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR
Name CRUZ, MARY ANN
Address 33920 US HWY 19 N
SUITE 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 VICE CHAIR, VC
Name WRIGHT, MABEL KATRINA
Address 33920 US HWY 19 N, STE 269
City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR
Name COAKLEY, DEBBIE
Address 33920 US HWY 19 N
269
City-State-Zip: PALM HARBOR FL 34684