

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765372

Entity Name: ALLEGANY FRANCISCAN MINISTRIES, INC.

FILED
Feb 20, 2024
Secretary of State
1039478176CC

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:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PRESIDENT, CEO
Name COOGAN, EILEEN S
Address 33920 US HWY 19 N
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 CHIARELLO, NANCY
Address 33920 US HWY 19 N SUITE 269
City-State-Zip: PALM HARBOR FL 34684

Title CHAIRMAN
Name WRIGHT, MABEL KATRINA
Address 33920 US HWY 19 N, STE 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 COAKLEY, DEBBIE
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 MAGEE, MARGARET
Address 33920 US HWY 19 N
 # 269
City-State-Zip: PALM HARBOR FL 34684

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: EILEEN COOGAN

PRESIDENT, CEO

02/20/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

Title DIRECTOR
Name HADDAD, ODETTE SR.
Address 33920 US HIGHWAY 19 N
STE 269
City-State-Zip: PALM HARBOR FL 34684

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

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

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

Title DIRECTOR
Name MARCUS, BROOKS
Address 33920 US HWY 19 N
SUITE 269
City-State-Zip: 34684, PALM HARBOR, FL FL 33145

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