

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000947

FILED
Jan 12, 2015
Secretary of State
CC7126282896

Entity Name: OFFICE OF PUBLIC GUARDIAN, INC.

Current Principal Place of Business:

1425 EAST PIEDMONT DRIVE
SUITE 201-B
TALLAHASSEE, FL 32308

Current Mailing Address:

1425 EAST PIEDMONT DRIVE
SUITE 201-B
TALLAHASSEE, FL 32308 US

FEI Number: 16-1652866

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CAMPBELL, KAREN P
1425 EAST PIEDMONT DRIVE
SUITE 201-B
TALLAHASSEE, FL 32308 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 CHAIRMAN
Name RICHARDSON, MARIO
Address 1555 DELANEY DRIVE
UNIT 1622
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name BLANK, SHELBY
Address 1405 CENTERVILLE RD STE 4400
City-State-Zip: TALLAHASSEE FL 32308

Title TREASURER
Name MERRICK, WIL
Address 3466 ZILLAH ST
City-State-Zip: TALLAHASSEE FL 32305

Title DIRECTOR
Name JARRETT, JOEL
Address 101 N. MONROE ST STE150
City-State-Zip: TALLAHASSEE FL 32301

Title CEO
Name CAMPBELL, KAREN
Address 2292 WEDNESDAY STREET
SUITE 1
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name HAMPSHIRE, GLENIQUE
Address 1914 WELCH STREET
City-State-Zip: TALLAHASSEE FL 32310

Title DIRECTOR
Name NELSON, LINDA
Address 3202 LAKESHORE DRIVE
City-State-Zip: TALLAHASSEE FL 32312

Title DIRECTOR
Name KENDRON, JOHN J
Address 582 W DUVAL STREET
City-State-Zip: LAKE CITY FL 32055

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: KAREN P. CAMPBELL

EXECUTIVE DIRECTOR

01/12/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FARRINGTON, DEIRDRE
Address P O BOX 392
City-State-Zip: CRAWFORDVILLE FL 32326

Title DIRECTOR
Name GABORDI, DONNA
Address 3566 BARTAN COURT
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name GRAHAM, JANET
Address 1400 VILLAGE SQUARE BLVD
3-154
City-State-Zip: TALLAHASSEE FL 32312