

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04172

**FILED**  
**May 05, 2014**  
**Secretary of State**  
**CC9085486987**

**Entity Name:** SICKLE CELL FOUNDATION, INCORPORATED

**Current Principal Place of Business:**

1336 VICKERS RD  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

1336 VICKERS RD  
TALLAHASSEE, FL 32303 US

**FEI Number:** 59-2518049

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

STEVENS, VELMA P  
1336 VICKERS RD  
TALLAHASSEE, FL 32303 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 ED  
Name STEVENS, VELMA P  
Address 906 KENDALL DRIVE  
City-State-Zip: TALLAHASSEE FL 32301

Title C  
Name PARKS, DARYL ESQ  
Address 240 NORTH MAGNOLIA DRIVE  
City-State-Zip: TALLAHASSEE FL 32301

Title VC  
Name HOLIDAY, ERVIN  
Address 1336 VICKERS RD  
City-State-Zip: TALLAHASSEE FL 32303

Title T  
Name SCOTT, TAITA  
Address 3225 HESTER DRIVE  
City-State-Zip: TALLAHASSEE FL 32309

Title D  
Name MARTIN, DEXTER  
Address 6738 DONERAIL TRAIL  
City-State-Zip: TALLAHASSEE FL 32308

Title S  
Name DUNCAN, PAMELA D  
Address 8108 PRESERVATION COURT  
City-State-Zip: TALLAHASSEE FL 32312

Title D  
Name FENNAL, MILDRED D  
Address 1336 VICKERS RD  
City-State-Zip: TALLAHASSEE FL 32303

Title D  
Name ROLLINS, JEFFREY  
Address 1336 VICKERS RD  
City-State-Zip: TALLAHASSEE FL 32303

**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:** VELMA PENERMON STEVENS

**EXECUTIVE DIRECTOR**

**05/05/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title D  
Name SPENCER, GWENDOLYN J  
Address 1336 VICKERS RD  
City-State-Zip: TALLAHASSEE FL 32303

Title D  
Name ONIFADE, TIFFIANI J  
Address 1336 VICKERS RD  
City-State-Zip: TALLAHASSEE FL 32303