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.

TREASURER

SIGNATURE: DONNA L. SMITH

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

431 SW BIRLEY AVENUE LAKE CITY, FL 32024

Current Mailing Address:

192 NW CAROL PL LAKE CITY, FL 32055 US

FEI Number: 61-1608751

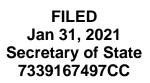
Name and Address of Current Registered Agent:

STANLEY, PENNY 135 N E HERNANDO ST **STE 203** LAKE CITY, FL 32055 US Certificate of Status Desired: No

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 | E PENNY STANLEY | | | 01/31/2021 |
|---------------------------|--|-----------------|----------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | PRES | Title | VP | |
| Name | STANLEY, PENNY | Name | STANLEY, JERRY | |
| Address | 167 NW CAROL PLACE | Address | 167 SW CAROL PLACE | |
| City-State-Zip: | LAKE CITY FL 32055 | City-State-Zip: | LAKE CITY FL 32055 | |
| Title | TRES | Title | EVENTS CORDINATOR | |
| Name | SMITH, DONNA L | Name | MCGUIRE, FLOSSIE | |
| Address | 192 NW CAROL PL | Address | 444 SW BIRLEY AVENUE | |
| City-State-Zip: | LAKE CITY FL 32055 | City-State-Zip: | LAKE CITY FL 32024 | |
| Title | SECRETARY | | | |
| Name | HOWARD, LINDA S | | | |
| Address | 246 SW WHEAT PLACE | | | |
| City-State-Zip: | LAKE CITY FL 32024 | | | |

Electronic Signature of Signing Officer/Director Detail



01/31/2021 Date