### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000009513

Entity Name: HOME AGAIN ST. JOHNS, INC.

**Current Principal Place of Business:** 

1850 SR 207

ST AUGUSTINE. FL 32086

**FILED** Apr 28, 2017 Secretary of State CC6961331180

## **Current Mailing Address:**

1850 SR 207

ST. AUGUSTINE. FL 32086 US

FEI Number: 45-3744914 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ALVARADO, OSCAR A&G BOOKKEEPING SERVICES 160 CYPRESS POINT PARKWAY UNIT A-102 PALM COAST, FL 32164 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: OSCAR ALVARADO 04/28/2017

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

**BOARD VICE-PRESIDENT** Title Title **TREASURER** Name DAVIS. MIKE Name BIANCE, MICHAEL Address 3940 LEWIS SPEEDWAY, SUITE 2201 Address 623 SUN DOWN CIRCLE City-State-Zip: ST AUGUSTINE FL 32080 City-State-Zip: ST. AUGUSTINE FL 32084

Title **BOARD SECRETARY** Title **PRESIDENT** VAN RYSDAM, CASEY Name Name BLEVINS, TROY Address 1527 SAN RAFAEL WAY Address 138 MARKLAND PLACE ST AUGUSTINE FL 32080 City-State-Zip: ST AUGUSTINE FL 32084 City-State-Zip:

Title DIRECTOR Title DIRECTOR

GILLESPIE, JOHN PASTOR Name DEINHART, AL Name 1112 STATE ROAD 16 Address Address 504 JEFFREY DRIVE City-State-Zip: ST AUGUSTINE FL 32084 City-State-Zip: ST AUGUSTINE FL 32086

Title DIRECTOR Title **DIRECTOR** 

Name VOORHEES, TED REVEREND Name MCCONDICHIE, ALEXA

Address 37 LOVETT STREET 100 SOUTH PARK BLVD Address

408B

City-State-Zip: ST AUGUSTINE FL 32086

ST AUGUSTINE FL 32084 City-State-Zip:

# 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: ELLEN WALDEN

Electronic Signature of Signing Officer/Director Detail

**EXECUTIVE DIRECTOR** 

04/28/2017

## Officer/Director Detail Continued:

Title EXECUTIVE DIRECTOR Title DIRECTOR

Name WALDEN, ELLEN Name CORNEAL, SETH D ESQ.

Address 4628 PEELE STREET Address 179 KING STREET

City-State-Zip: ELKTON FL 32033 City-State-Zip: ST AUGUSTINE FL 32084

Title DIRECTOR Title DIRECTOR

Name O'BYRNE, NANCY Name FOX, BARRY CHIEF

Address 5308 SECOND ST Address 151 KING STREET

City-State-Zip: ST AUGUSTINE FL 32080 City-State-Zip: ST AUGUSTINE FL 32084