

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000005825

Entity Name: DR N.H. JONES PARENTS ORGANIZATION, INC.

Current Principal Place of Business:

1900 SW 5TH ST
OCALA, FL 34471

Current Mailing Address:

1900 SW 5TH ST
OCALA, FL 34471

FEI Number: 45-5511105

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORTES, JOSE H JR.
4 SE BROADWAY ST
OCALA, FL 34471 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: JOSE H. CORTES, JR.

04/12/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name REED, AMANDA
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title DIRECTOR
Name RUDNIANYN, PAM
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title DIRECTOR
Name BOUTWELL, VICKI
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title DIRECTOR
Name BRIGGS, NADIA
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title DIRECTOR
Name CRAIG, LORI
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title DIRECTOR
Name CUSHENBERRY, KARIN
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title DIRECTOR
Name EGGERS, JENNIFER
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title DIRECTOR
Name GRACE, MERIBETH
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

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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: JOSE H. CORTES, JR.

DIRECTOR

04/12/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HISE, SHANA
Address 1900 SW 5TH ST
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name MENTZER, HOLLY
Address 1900 SW 5TH ST
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name O'NEAL, JENNI
Address 1900 SW 5TH ST
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name THOMAS, DEANNA
Address 1900 SW 5TH ST
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name CORTES, JOSE H JR.
Address 1900 SW 5TH ST
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name KEEN, KEVIN
Address 1900 SW 5TH ST
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name NIJHER, SUKHBIR
Address 1900 SW 5TH ST
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name PLUNKETT, LINDA
Address 1900 SW 5TH ST
City-State-Zip: OCALA FL 34471

Title DIRECTOR
Name VAUSE, BRITTANY
Address 1900 SW 5TH ST
City-State-Zip: OCALA FL 34471