

2013 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.

04/26/2013

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title D
Name FECHTMAN, LORRI
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title D
Name VARGO, JESSICA
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title D
Name EPSTEIN, KAY
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

Title D
Name MIZZONI, MISTY
Address 1900 SW 5TH ST
City-State-Zip: Ocala FL 34471

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

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

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: LORRI FECHTMAN

DIRECTOR

04/26/2013

Electronic Signature of Signing Officer/Director Detail

Date