

2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N14695

Entity Name: NASSAU COUNTY MENTAL HEALTH, ALCOHOLISM AND DRUG ABUSE COUNCIL, INC.

Current Principal Place of Business:

463142 SR 200
YULEE, FL 32097

Current Mailing Address:

463142 SR 200
YULEE, FL 32097 US

FEI Number: 59-3029469

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PAGEL, LAUREEN
463142 SR 200
YULEE, FL 32097 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 VPD
Name BARNES, PAUL
Address 97056 ARNOLD RIDGE DRIVE
City-State-Zip: YULEE FL 32097

Title PD
Name ASHWELL, DRUE
Address 97192 MITCHELL ROAD
City-State-Zip: YULEE FL 32097

Title SECRETARY
Name BELL, NANCY
Address POBOX 17225
City-State-Zip: FERNANDINA BEACH FL 32034

Title DIRECTOR
Name MCKENNA, THOMAS
Address 2668 OCEAN COVE DRIVE
City-State-Zip: FERNANDINA BEACH FL 32034

Title TREASURER
Name SAMSON, DAVE
Address 1866 1ST AVENUE
City-State-Zip: FERNANDINA BEACH FL 32034

Title OFFICER
Name PAGEL, LAUREEN
Address 3002 RIVERSIDE DRIVE
City-State-Zip: FERNANDINA BEACH FL 32034

Title CFO
Name MOSLEY, JOHN
Address 11409 OAKLAWN ROAD
City-State-Zip: JACKSONVILLE FL 32218

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: LAUREEN PAGEL

REGISTERED AGENT

10/10/2016

Electronic Signature of Signing Officer/Director Detail

Date