

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000010598

Entity Name: THE AFFIRMATIVE CONSENT PROJECT, INC.

Current Principal Place of Business:

12558 BASS RD
LIVE OAK, FL 32060

Current Mailing Address:

PO BOX 1304
LIVE OAK, FL 32064 US

FEI Number: 47-5472725

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COLLINS, CODY
12558 BASS RD
LIVE OAK, FL 32060 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: CODY COLLINS

02/10/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PDT
Name COLLINS, CODY
Address 12558 BASS RD
City-State-Zip: LIVE OAK FL 32060

Title DIRECTOR
Name BERKE, ALISON
Address 900 PLAZA ROAD
APT# 78
City-State-Zip: ATLANTIC BEACH FL 32233

Title DIRECTOR
Name CHAUNCEY, JOHN
Address 6208 US HIGHWAY 129 NORTH
City-State-Zip: LIVE OAK FL 32060

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: CODY COLLINS

PRESIDENT

02/10/2017

Electronic Signature of Signing Officer/Director Detail

Date