

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000011748

Entity Name: WOMEN'S EMPOWERMENT SERVICES OF NE FLORIDA, INC**Current Principal Place of Business:**2974 ROSECRANS LANE
GREEN COVE SPRINGS, FL 32043**Current Mailing Address:**2974 ROSECRANS LANE
GREEN COVE SPRINGS, FL 32043 US**FEI Number: 82-3499882****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**BROWN, THERESA H
2974 ROSECRANS LANE
GREEN COVE SPRINGS, FL 32043 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 PRESIDENT AND MEMBER OF BOARD
OF DIRECTORS
Name LIVSEY, LILYAN J
Address 5339 THOROUGHbred BLVD
City-State-Zip: JACKSONVILLE FL 32257

Title VP, CHAIRPERSON OF THE BOARD
OF DIRECTORS
Name BROWN, THERESA H
Address 2974 ROSECRANS LANE
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title MEMBER OF THE BOARD OF
DIRECTORS
Name BROOKER-BRITT, DEBBIE
Address 3144 BYRON ROAD
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title SECRETARY OF BOARD OF
DIRECTORS
Name ALCANTER, JILL
Address 3569 JIM'S CT
City-State-Zip: GREEN COVE SPRINGS FL 32043

Title MEMBER OF BOARD OF DIRECTORS
Name CRABBE, RODERICK
Address ALLSTATE INSURANCE
1123 KINGSLEY AVENUE
City-State-Zip: ORANGE PARK FL 32073

Title MEMBER OF THE BOARD OF
DIRECTORS
Name MOSS, KATE
Address 330 ARDMORE CIRCLE NW
C136
City-State-Zip: ATLANTA GA 30309

Title FIRST VICE CHAIR OF THE BOARD OF
DIRECTORS
Name HIGHTOWER, SUSAN
Address 7 BLUEFISH PLACE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title MEMBER OF BOARD OF DIRECTORS
Name WALKER, RACHEL
Address CLAY COUNTY ADULT AND
COMMUNITY EDUCATION
2306 KINGSLEY AVE
City-State-Zip: ORANGE PARK FL 32073

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: THERESA BROWN**VP****03/04/2021**

Electronic Signature of Signing Officer/Director Detail

Date