

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N25916

**Entity Name:** PROVIDENCE CENTER, INC.

**Current Principal Place of Business:**

16612 NW 46TH AVE  
ALACHUA, FL 32615

**Current Mailing Address:**

16612 NW 46TH AVE  
ALACHUA, FL 32615

**FEI Number:** 59-2888276

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WELCH, JAMES J.  
16612 NW 46TH AVE.  
ALACHUA, FL 32615 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 PD  
Name GLUMAC, JANET M.  
Address 16612 NW 46 AVE  
City-State-Zip: ALACHUA FL 32615

Title STD  
Name WELCH, JAMES J.  
Address 5142 SW 92ND COURT  
City-State-Zip: GAINESVILLE FL

Title VD  
Name BURNS, DAVID A  
Address 16612 NW 46TH AVE  
City-State-Zip: ALACHUS FL 32615

*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:** DAVID A BURNS

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01/17/2017

Electronic Signature of Signing Officer/Director Detail

Date