

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N41555

**Entity Name:** FLORIDA FAMILY COUNCIL, INC.

**Current Principal Place of Business:**

5211 W. LAUREL STREET  
SUITE 102  
TAMPA, FL 33607

**Current Mailing Address:**

5211 W. LAUREL STREET  
SUITE 102  
TAMPA, FL 33607 US

**FEI Number:** 59-3043408

**Certificate of Status Desired:** Yes

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

MERRILL, MARK W.  
5211 W. LAUREL STREET  
SUITE 102  
TAMPA, FL 33607 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 PTSD  
Name MERRILL, MARK W.  
Address 5211 W. LAUREL ST., SUITE 102  
City-State-Zip: TAMPA FL 33607

Title D  
Name CARMICHAEL, MICHAEL  
Address 1511 S.W. FIRST AVE.  
City-State-Zip: OCALA FL 34474

Title D  
Name BABCOCK, CHARLES IIII  
Address 2914 ELYSIUM WAY  
City-State-Zip: CLEARWATER FL 34619

Title D  
Name BABCOCK, MARY ANNE  
Address 2914 ELYSIUM WAY  
City-State-Zip: CLEARWATER FL 33759

Title D  
Name GAYLORD, S C  
Address 900 LORENA RD  
City-State-Zip: LUTZ FL 33549

*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:** MARK W MERRILL

**PRESIDENT**

**02/06/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date