## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47201

Entity Name: DAMAYAN, INC.

**FILED** Jan 30, 2015 **Secretary of State** CC0112060755

Date

**Current Principal Place of Business:** 

1401 HIGH ROAD

TALLAHASSEE, FL 32304

**Current Mailing Address:** 

P.O. BOX 38401

TALLAHASSEE. FL 32315-8401 US

FEI Number: 59-3113153 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PHIPPS, LAURA 4975 CLIPPYS DRIVE TALLAHASSEE, FL 32303 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: LAURA PHIPPS 01/30/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

TAYLOR, BILL ESTEVEZ, ROBBIE Name Name 1516 COOMBS DRIVE Address 228 EAST LAKE LANE Address

City-State-Zip: TALLAHASSEE FL 32308 QUINCY FL 32351 City-State-Zip:

Title DIRECTOR, VP Title DIRECTOR, CHAIRMAN Name LUNDY, PORTIA Name PHIPPS, LAURA Address 1447 STONE ROAD Address 4975 CLIPPYS DRIVE **APARTMENT # F 45** 

> City-State-Zip: TALLAHASSEE FL 32303

Title **DIRECTOR** 

TALLAHASSEE FL 32303

City-State-Zip:

Title **DIRECTOR** WEISS. KATHRYN Name Name TANCIG. MARK

1121 LASSWADE DRIVE Address Address 1519 JACKSON STREET City-State-Zip: TALLAHASSEE FL 32312 City-State-Zip: TALLAHASSEE FL 32303

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.

01/30/2015 SIGNATURE: LAURA PHIPPS **CHAIRMAN**