Entity Name: HEALTHY START COMMUNITY COALITION OF OKALOOSA-WALTON COUNTIES INC.

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

HEALTHY START OKALOOSA-WAL. 102 BEAL PARKWAY SW FT WALTON BEACH, FL 32548

Current Mailing Address:

DOCUMENT# N47733

HEALTHY START OKALOOSA-WAL. 102 BEAL PARKWAY SW FT WALTON BEACH, FL 32548 US

FEI Number: 59-3115322

Name and Address of Current Registered Agent:

BUSH, ARDELLE 102 BEAL PARKWAY SW FORT WALTON BCH, FL 32548 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.

ANDELLE DUSIT	ARDELLE BUSH		
Electronic Signature of Registered Agent		Da	
tor Detail :			
ED	Title	PRESIDENT	
BUSH, ARDELLE	Name	BARLOW, BONNIE	
102 BEAL PARKWAY SW	Address	205 SHELL AVE.	
FT. WALTON BEACH FL 32548	City-State-Zip:	FORT WALTON BEACH FL 32548	
VICE CHAIR	Title	TREASURER	
RYAN, TERESA DR	Name	SEARLE, JAMI	
100 COLLEGE BLVD	Address	32 NW BEAL PARKWAY	
NICEVILLE FL 32578	City-State-Zip:	FORT WALTON BEACH FL 32548	
PAST PRESIDENT	Title	BOARD MEMBER	
HERF, AMY LYNN	Name	RATCLIFFE, WALLY	
435 BROOKMEAD DR	Address	643 CREEK CIRCLE	
CRESTVIEW FL 32539	City-State-Zip:	FORT WALTON BEACH FL 32547	
BOARD MEMBER	Title	DIRECTOR	
RILEY, ATHENA	Name	BURNS, MICHELLE	
3 PLEW AVENUE	Address	409 RACETRACK RD NE	
SHALIMAR FL 32579	City-State-Zip:	FORT WALTON BEACH FL 32547	
	Cor Detail : ED BUSH, ARDELLE 102 BEAL PARKWAY SW FT. WALTON BEACH FL 32548 VICE CHAIR RYAN, TERESA DR 100 COLLEGE BLVD NICEVILLE FL 32578 PAST PRESIDENT HERF, AMY LYNN 435 BROOKMEAD DR CRESTVIEW FL 32539 BOARD MEMBER RILEY, ATHENA 3 PLEW AVENUE	cor Detail :EDTitleBUSH, ARDELLEName102 BEAL PARKWAY SWAddressFT. WALTON BEACH FL 32548City-State-Zip:VICE CHAIRTitleRYAN, TERESA DRName100 COLLEGE BLVDAddressNICEVILLE FL 32578City-State-Zip:PAST PRESIDENTTitleHERF, AMY LYNNName435 BROOKMEAD DRAddressCRESTVIEW FL 32539City-State-Zip:BOARD MEMBERTitleRILEY, ATHENAName3 PLEW AVENUEAddress	

Continues on page 2

ED

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: ARDELLE BUSH

Electronic Signature of Signing Officer/Director Detail

FILED Feb 12, 2024 Secretary of State 1471951434CC

Certificate of Status Desired: No

Date

02/12/2024

Officer/Director Detail Continued :

City-State-Zip: MARY ESTHER FL 32544

Title	DIRECTOR	Title	DIRECTOR
Name	FAIR, HENRY	Name	MILLS, ALEXSIS
Address	113 WOODBINE CIRCLE	Address	9961 E CO HWY 30A, SUITE 1
City-State-Zip:	FORT WALTON BEACH FL 32548	City-State-Zip:	SEACREST FL 32461
Title	SECRETARY	Title	DIRECTOR
Tille	SECRETART		
Name	MARSE, JULIANNE	Name	HAIR, KEN
Address	7800 US HWY 98 W	Address	1000 LUKE'S WAY
City-State-Zip:	MIRAMAR BEACH FL 32550	City-State-Zip:	FORT WALTON BEACH FL 32547
Title	DIRECTOR		
Name	SIMS, SHIRLEY		
Address	59 RUBY CIRCLE		