

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000294

Entity Name: NATIVE AMERICAN PEOPLES SOCIETY OF FLORIDA, INC**Current Principal Place of Business:**ELMER M TAYLOR
581 CHERRY TREE LN
DELAND, FL 32724**Current Mailing Address:**581 CHERRY TREE LN.
DELAND, FL 32724**FEI Number:** 59-3284500**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TAYLOR, ELMER M
581 CHERRY TREE LN
DELAND, FL 32724 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	TAYLOR, ELMER M
Address	581 CHERRY TREE LN
City-State-Zip:	DELAND FL 32724

Title	SBM
Name	THIBODEAU, DENISE
Address	363 BAKER AV
City-State-Zip:	LAKE HELEN FL 32724

Title	FD
Name	PARKER, LINDA
Address	311 E. 2ND ST
City-State-Zip:	CHULUOTA FL 32766

Title	VP
Name	GRAFT, JODY
Address	428 ALMA ST.
City-State-Zip:	LADY LAKE FL 32159

Title	VP
Name	MCMILLAN, ALISON
Address	P.O. BOX .3724
City-State-Zip:	DELAND FL 32721

Title	VP
Name	ASHLEY, MARY D
Address	20846 BURROWS DR
City-State-Zip:	HOWARD CITY MI 49329

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: ELMER M TAYLOR

PD

02/13/2015

Electronic Signature of Signing Officer/Director Detail

Date