# 2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N96000004679

Entity Name: FAMILY PROMISE OF GAINESVILLE, FLORIDA, INC.

FILED
Jul 23, 2025
Secretary of State
5291446392CC

#### **Current Principal Place of Business:**

229 S.W. 5TH STREET GAINESVILLE, FL 32601

# **Current Mailing Address:**

P.O. BOX 5189

GAINESVILLE, FL 32627 US

FEI Number: 59-3414493 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WILLIAMS, BLANCHE 229 S.W. 5TH STREET GAINESVILLE, FL 32601 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: BLANCHE WILLIAMS 07/23/2025

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title **SECRETARY** Title **TREASURER** Name PONZIO, KIMBERLY Name HASKO, KIMBERLY 2210 NW 28TH STREET Address 8503 SW 4TH PL Address City-State-Zip: GAINESVILLE FL 32605 City-State-Zip: GAINESVILLE FL 32607

Title PRESIDENT Title COO

Name TARYN, BUCKLEY Name JONES, SHARI

Address 5700 SW 34TH STREET Address 229 SW 5HT STREET

City-State-Zip: GAINESVILLE FL 32601 City-State-Zip: GAINESVILLE FL 32627

Title VP Title CEO

NameBEUKELMAN, LINDSEYNameWILLIAMS, BLANCHEAddressP.O. BOX 5189Address229 S.W. 5TH STREETCity-State-Zip:GAINESVILLE FL 32627City-State-Zip:GAINESVILLE FL 32601

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: BLANCHE WILLIAMS

CEO

07/23/2025