2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N98000003391

Entity Name: OBSESSIVE - COMPULSIVE FOUNDATION OF JACKSONVILLE,

Current Principal Place of Business:

7643 GATE PARKWAY #104-1400

JACKSONVILLE, FL 32256-2893

Current Mailing Address:

7643 GATE PARKWAY SUITE #104 - 1400 JACKSONVILLE, FL 32256 US

FEI Number: 32-0497745 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PORTER, CATHERINE 581 TIMBERCREST LANE FLEMING ISLAND, FL 32003 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: CATHERINE PORTER 11/21/2021

Electronic Signature of Registered Agent

Date

FILED

Nov 21, 2021

Secretary of State 9364568278CC

Officer/Director Detail:

Title **PRESIDENT** Title **TREASURER**

VATTER, MICHAEL E PORTER, CATHERINE Name Name Address

12401-1 FOREST LAKE CIRCLE Address 581 TIMBERCREST LANE NORTH

FLEMING ISLAND FL 32003 City-State-Zip: City-State-Zip: JACKSONVILLE FL 32225

Title **SECRETARY** Title

Name WOOD, TIFFANY Name BENNETT, MICHAEL

Address 1239 MAYPORT LANDING DRIVE Address 8495 BLUESTEM COURT

City-State-Zip: JACKSONVILLE FL 32233 City-State-Zip: JACKSONVILLE FL 32244-6025

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: CATHERINE PORTER