TREASURER

SIGNATURE: CATHERINE PORTER

Electronic Signature of Signing Officer/Director Detail

2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N98000003391

Entity Name: OBSESSIVE - COMPULSIVE FOUNDATION OF JACKSONVILLE, INC.

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

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			11/22/2021
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	TREASURER	
Name	VATTER, MICHAEL E	Name	PORTER, CATHERINE	
	12401-1 FOREST LAKE CIRCLE	Address	581 TIMBERCREST LANE	
City-State-Zip:	NORTH JACKSONVILLE FL 32225	City-State-Zip:	FLEMING ISLAND FL 32003	
Title		Title	SECRETARY	
Title		Name	WOOD, TIFFANY	
Name	BENNETT, MONA D.	Address 123	1239 MAYPORT LANDING DRIV	/E
Address 8	8495 BLUESTEM COURT	City-State-Zip:	JACKSONVILLE FL 32233	
City-State-Zip:	JACKSONVILLE FL 32244-6025			

Certificate of Status Desired: Yes

FILED Nov 22, 2021 Secretary of State 7209210225CC

11/22/2021