

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004668

Entity Name: FLORIDA ASSOCIATION OF COUNTY HUMAN SERVICES ADMINISTRATORS, INC.

**FILED
Feb 24, 2015
Secretary of State
CC8543038820**

Current Principal Place of Business:

100 SOUTH MONROE STREET
TALLAHASSEE, FL 32302

Current Mailing Address:

437 N 7 STREET
FORT PIERCE, FL 34950 US

FEI Number: 59-3527802

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA ASSOCIATION OF COUNTIES, INC.
100 MONROE STREET
TALLAHASSEE, FL 32301 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 PAST PRESIDENT
Name TUCK, CLAUDIA
Address 810 DATURA STREET, STE. 350
City-State-Zip: WEST PALM BEACH FL 33401

Title PRESIDENT
Name ARNALL, ANN
Address 2440 THOMPSON STREET
City-State-Zip: FT MYERS FL 33901

Title TREASURER
Name MYERS, STEFANIE
Address 437 N 7 STREET
City-State-Zip: FORT PIERCE FL 34950

Title SECRETARY
Name TURNER, VALMARIE
Address 534 W. LAKE MARY BOULEVARD
City-State-Zip: SANDFORD FL 32773-7400

Title PRESIDENT ELECT
Name LEWIS, EMILY
Address 1050 LOVELAND BLVD.
City-State-Zip: PORT CHARLOTTE FL 33980

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: STEFANIE MYERS

TREASURER

02/24/2015

Electronic Signature of Signing Officer/Director Detail

Date