## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000844

Entity Name: A WOMEN'S RESOURCE CENTER OF PALATKA FLORIDA INC.

FILED Feb 11, 2016 Secretary of State CC0777479141

# **Current Principal Place of Business:**

3403 ST. JOHNS AVE. PALATKA FL 32177

## **Current Mailing Address:**

**PO BOX 811** 

PALATKA FL 32178

FEI Number: 59-3569298 Certificate of Status Desired: Yes

# Name and Address of Current Registered Agent:

MCLANE, BETTY 7300 CRILL AVE LOT 25

PALATKA, FL 32177 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: BETTY MCLANE 02/11/2016

Electronic Signature of Registered Agent Date

## Officer/Director Detail:

Title BC Title BS

NamePARISH, DUFFNameHARRIS, SHIRLEYAddress293 STOKES LANDING RDAddress103 THICKET LANECity-State-Zip:PALATKA FL 32177City-State-Zip:PALATKA FL 32177

Title BVC Title BM

Name BAGGETT, ALLEN Name GILL, DARCI

Address 130 LATESHA TERRACE Address 140 LAKE EDGE TRAIL

City-State-Zip: PALATKA FL 32177 City-State-Zip: INTERLACHEN FL 32148

Title BM

Name WILSON, JOYCE
Address 103 BOWFIN DR

City-State-Zip: PALATKA FL 32177

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.

BC

Electronic Signature of Signing Officer/Director Detail

02/11/2016