### **2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000000844

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

FILED
Jan 08, 2019
Secretary of State
9523072576CC

Date

## **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 120 ROBERTS LANE 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 01/08/2019

Electronic Signature of Registered Agent Date

### Officer/Director Detail:

Title BC Title BS

NamePARISH, DUFFNameHARRIS, SHIRLEYAddress144 LATESHA TERRACEAddress103 THICKET LANECity-State-Zip:PALATKA FL 32177City-State-Zip:PALATKA FL 32177

Title BVC Title BM

Name PARCHER, EDDIE Name GILL, DARCI

Address 224 RIVER DRIVE Address 140 LAKE EDGE TRAIL

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

Title TREASURER Title BM

Name KNOWLES, SCOTT Name MAXWELL, AMY

Address 113 EAST END ROAD Address 170 HORSEMAN CLUB ROAD

City-State-Zip: SAN MATEO FL 32187 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.

SIGNATURE: DUFF PARISH BOARD CHAIR 01/08/2019