

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000000844

Entity Name: A WOMEN'S RESOURCE CENTER OF PALATKA FLORIDA INC.**Current Principal Place of Business:**219 N PALM 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

01/04/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PARCHER, EDDIE
Address 224 RIVER DRIVE
City-State-Zip: PALATKA FL 32177

Title TREASURER
Name KNOWLES, SCOTT
Address 113 EAST END ROAD
City-State-Zip: SAN MATEO FL 32187

Title BM
Name MAXWELL, AMY
Address 170 HORSEMAN CLUB ROAD
City-State-Zip: PALATKA FL 32177

Title VP
Name CAISON, DUSTIN
Address 224 MOTES ROAD
City-State-Zip: PALATKA FL 32177

Title BOARD MEMBER
Name SMITH, CHRISTA
Address 375 HORSEMAN CLUB ROAD
City-State-Zip: PALATKA FL 32177

Title BOARD MEMBER
Name SPEDDEN, TAMMY
Address 106 DUNLAWTON AVENUE
City-State-Zip: SAN MATEO FL 32187

Title SECRETARY
Name HOBBS, ANGIE
Address 151 LATESHA TERRACE
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: EDDIE PARCHER

BOARD PRESIDENT

01/04/2023

Electronic Signature of Signing Officer/Director Detail

Date