

**2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F16000005094

**FILED**  
**Mar 01, 2018**  
**Secretary of State**  
**CC2474033798**

**Entity Name:** IMPACT AMERICA, INC.

**Current Principal Place of Business:**

1801 MISCCOSUKEE COMMONS DR, STE 200  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

1901 6TH AVE N, STE 2400  
BIRMINGHAM, AL 35203 US

**FEI Number:** 20-0850212

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

STRICKLAND, STEPHANIE  
1801 MISCCOSUKEE COMMONS DR, STE 200  
TALLAHASSEE, FL 32308 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:** STEPHANIE STRICKLAND

03/01/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title C  
Name BLACK, STEPHEN  
Address 1901 6TH AVE N  
STE 2400  
City-State-Zip: BIRMINGHAM AL 35203

Title DS  
Name SHAH, MITESH  
Address 1901 6TH AVE N, STE 2400  
City-State-Zip: BIRMINGHAM AL 35203

Title DT  
Name GARY BRANUM, EMILY  
Address 1800 INTERNATIONAL PARK DR, STE  
400  
City-State-Zip: BIRMINGHAM AL 35243

Title D  
Name BANNON, RUSSELL  
Address 2012 CHESTNUT RD  
City-State-Zip: BIRMINGHAM AL 35216

Title D  
Name FLEMING-COLLINS, NOELLE  
Address 42 INVERNESS CENTER  
City-State-Zip: BIRMINGHAM AL 35242

Title D  
Name BATTLE, BOB  
Address 2901 2ND AVENUE SOUTH, SUITE 220  
City-State-Zip: BIRMINGHAM AL 35233

Title D  
Name HODGES, PHILIP L  
Address 500 BEACON PARKWAY WEST  
City-State-Zip: BIRMINGHAM AL 35209

Title D  
Name LOLLEY, VIRGINIA DR  
Address 700 18TH STREET SOUTH  
SUITE 601  
City-State-Zip: BIRMINGHAM AL 35233

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*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:** SARAH LOUISE SMITH

**EXECUTIVE DIRECTOR**

03/01/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name SCHOONOVER, HEIDI  
Address 150 SOUTH STRATFORD ROAD  
SUITE 330  
City-State-Zip: WINSTON-SALEM NC 27104

Title D  
Name WHITE, MARJORIE LEE DR  
Address 1600 7TH AVENUE SOUTH, SUITE 205  
City-State-Zip: BIRMINGHAM AL 35233

Title D  
Name COUNCIL, BRYAN  
Address 612 37TH STREET SOUTH  
City-State-Zip: BIRMINGHAM AL 35222

Title ED  
Name SMITH, SARAH LOUISE  
Address 1901 6TH AVE N  
SUITE 2400  
City-State-Zip: BIRMINGHAM AL 35203