

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706569

FILED
Jan 06, 2011
Secretary of State

Entity Name: ADVOCACY RESOURCE CENTER MARION, INC.

Current Principal Place of Business:

2800 S.E. MARICAMP ROAD
OCALA, FL 344715551

New Principal Place of Business:

Current Mailing Address:

2800 SE MARICAMP RD
OCALA, FL 344715551

New Mailing Address:

FEI Number: 59-2217524

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STRAWDER, TROY CEO
2800 SE MARICAMP RD
OCALA, FL 344715551 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DT
Name: MICHELL, PAMELA W
Address: 2324 SE 14TH ST.
City-St-Zip: Ocala, FL 34471

Title: DS
Name: BAILEY, CAROL
Address: 4224 SE 12TH PL
City-St-Zip: Ocala, FL 34471

Title: DP
Name: FALANGA, TOM
Address: 10140 SE 42ND CT
City-St-Zip: BELLEVIEW, FL 34420

Title: DV
Name: STENZEL, GARY
Address: 6888 SW 97TH PL
City-St-Zip: Ocala, FL 34476

Title: DVP
Name: GIFFORD, ERIC
Address: 1531 SE 36TH AVE
City-St-Zip: Ocala, FL 34474

Title: D
Name: CAMPBELL, ALLISON
Address: 4720 SE 33RD ST
City-St-Zip: Ocala, FL 34480

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: TROY STRAWDER

CEO

01/06/2011

Electronic Signature of Signing Officer or Director

Date