

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711041

FILED
Feb 15, 2011
Secretary of State

Entity Name: APALACHEE CENTER, INC.

Current Principal Place of Business:

2634-J CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2634-J CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-1162148

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REEVE, JAY
2634-J CAPITAL CIRCLE NE
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

REEVE, JAY
2634-J CAPITAL CIRCLE NE
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: JAY REEVE

02/15/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: REEVE, JAY
Address: 2634-J CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

Title: VP
Name: KELLY, VIRGINIA H
Address: 2634-J CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: HOSFORD, KENNETH
Address: 2634-J CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: FLEET, EDWIN
Address: 2634-J CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

Title: D
Name: DAVIS, FORREST J
Address: 2634-J CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

Title: S
Name: CONGER, SUE
Address: 2634-J CAPITAL CIRCLE NE
City-St-Zip: TALLAHASSEE, FL 32308

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: VIRGINIA H. KELLY

VP

02/15/2011

Electronic Signature of Signing Officer or Director

Date