

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 719680

FILED
Apr 29, 2010
Secretary of State

Entity Name: FLORENCE VILLA NEIGHBORHOOD SERVICE CENTER, INC.

Current Principal Place of Business:

608 AVENUE S N E
WINTER HAVEN, FL 33881

New Principal Place of Business:

Current Mailing Address:

608 AVENUE S N E
WINTER HAVEN, FL 33881

New Mailing Address:

FEI Number: 06-0003331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, GLENDA W
608 AVE S N E
WINTER HAVEN, FL 33881 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: PD
Name: JOHNSON, III, U.J.
Address: 560 SEARS AVE
City-St-Zip: WINTER HAVEN, FL 33881

Title: VD
Name: JONES, BENJAMIN R
Address: 2410 N SWAN DRIVE NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: SD
Name: HUNTER, EDYTHE
Address: P.O. BOX 3516- 507 AVENUE T, NE
City-St-Zip: WINTER HAVEN, FL 33885

Title: D
Name: HUNTER, MAXIE E
Address: 228 COLLEGE GROVE CIRCLE
City-St-Zip: WINTER HAVEN, FL 33881

Title: D
Name: HIXON, KAYE
Address: 200 AVE F NE
City-St-Zip: WINTER HAVEN, FL 33881

Title: TR
Name: PERKINS, JAMES
Address: 2116 EDWIN ST NE
City-St-Zip: WINTER HAVEN, FL 33881

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: JAMES PERKINS

TR

04/29/2010

Electronic Signature of Signing Officer or Director

Date