

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721174

FILED
Mar 19, 2012
Secretary of State

Entity Name: SENIOR CITIZENS COUNCIL OF MADISON COUNTY, INC.

Current Principal Place of Business:

486 SW RUTLEDGE ST
MADISON, FL 32340

New Principal Place of Business:

1161 SW HARVEY GREENE DRIVE
MADISON, FL 32340

Current Mailing Address:

PO BOX 204
MADISON, FL 32341 US

New Mailing Address:

FEI Number: 23-7097794

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RICHARDSON, ROSA
486 SW RUTLEDGE ST
MADISON, FL 32340 US

Name and Address of New Registered Agent:

RICHARDSON, ROSA B
1161 SW HARVEY GREENE DRIVE
MADISON, FL 32340 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: ROSA B RICHARDSON

03/19/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T
Name: PEAVY, OPIE
Address: RT. 4 BOX 6012
City-St-Zip: MADISON, FL 32340

Title: VPD
Name: PHILLIPS, HOWARD
Address: 403 SW RAVEN WOOD WAY
City-St-Zip: MADISON, FL 32340

Title: PD
Name: RAY, JAMES
Address: P. O. BOX 763
City-St-Zip: MADISON, FL 32340

Title: S
Name: PRITCHETT, ELESTA
Address: 272 SW RAY CHARLES AVE.
City-St-Zip: GREENVILLE, FL 32331

Title: D
Name: PEAVY, JOE
Address: 5188 N. STATE
City-St-Zip: MADISON, FL 32340

Title: D
Name: PARRISH, RENETTA
Address: 423 SW ALDERENCE PARKWAY
City-St-Zip: MADISON, FL 32340

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: ROSA B RICHARDSON

ED

03/19/2012

Electronic Signature of Signing Officer or Director

Date