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FILED

May 20 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 724184 (7)

1. Corporation Name

ASSOCIATION FOR RETARDED CITIZENS/ESCAMBIA, INC.

Principal Place of Business

3913 N TENTH AVE  
PENSACOLA FL 32503-2806  
US

Mailing Address

3913 NORTH 10TH AVENUE  
PENSACOLA FL 32503-28063. Date Incorporated or Qualified  
08/24/19723a. Date of Last Report  
04/22/1996

2. Principal Place of Business

21 3916 N. Tenth Ave

Suite, Apt. #, etc.

22 Pensacola

City &amp; State

23 FL

Zip

24 32503

Country

25 Escambia

2a. Mailing Address

26 3916 N. Tenth Ave.

Suite, Apt. #, etc.

27 Pensacola

City &amp; State

28 FL

Zip

29 32503

Country

30 Escambia

4. FEI Number

59-0940528

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

FASSETT, DONNA  
3913 N. TENTH AVE  
PENSACOLA FL 32503

10. Name and Address of New Registered Agent

81 Name

FASSETT, DONNA

82 Street Address (P.O. Box Number is Not Acceptable)

3916 N. Tenth Ave

83

Pensacola

84 City

FL

85

Zip Code

32503

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETENAME COVERT, SHIRLEY  
STREET ADDRESS 3393 DUNEY DR  
CITY - ST - ZIP CANTONMENT FLTITLE VPD ☐ DELETENAME EVANS, JAMES  
STREET ADDRESS 3009 BLACKSHEAR AVE  
CITY - ST - ZIP PENSACOLA FLTITLE TD ☐ DELETENAME BLACKWELL, JAMES  
STREET ADDRESS 2412 OAKHILLS CIRCLE  
CITY - ST - ZIP PENSACOLA FLTITLE SD ☐ DELETENAME FLEMING, JENNIFER  
STREET ADDRESS 2604 YATES AVE  
CITY - ST - ZIP PENSACOLA FLTITLE ED ☐ DELETENAME FASSETT, DONNA  
STREET ADDRESS 3913 N TENTH AVE  
CITY - ST - ZIP PENSACOLA FLTITLE ☐ DELETENAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☐ Addition1.2 NAME COVERT, SHIRLEY  
1.3 STREET ADDRESS 3393 DuneY Dr.  
1.4 CITY - ST - ZIP Cantonment, FL 325332.1 TITLE VP ☐ Change ☐ Addition2.2 NAME EVANS, JAMES  
2.3 STREET ADDRESS 3009 Blackshear Ave  
2.4 CITY - ST - ZIP Pensacola, FL 325033.1 TITLE TD ☐ Change ☐ Addition3.2 NAME BLACKWELL, JAMES  
3.3 STREET ADDRESS 2412 Oakhills Cir  
3.4 CITY - ST - ZIP Pensacola, FL4.1 TITLE SD ☐ Change ☐ Addition4.2 NAME FLEMING, JENNIFER  
4.3 STREET ADDRESS 2604 Yates Ave.  
4.4 CITY - ST - ZIP Pensacola, FL 325045.1 TITLE ED ☐ Change ☐ Addition5.2 NAME FASSETT, DONNA  
5.3 STREET ADDRESS 3916 N. Tenth Ave Pensacola, FL 32503  
5.4 CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Donna Fasset

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/7/97

Date

Deadline Phone # 907-262-2121

CR2E037 (9/96)