

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748673

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Entity Name:** RIVER REGION HUMAN SERVICES, INC.

**Current Principal Place of Business:**

2055 REYKO ROAD  
SUITE 101  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

**Current Mailing Address:**

2055 REYKO ROAD, SUITE 101  
C/O ED MCCALL  
JACKSONVILLE, FL 32207 US

**New Mailing Address:**

**FEI Number:** 59-1952727

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MCCALL, LUTHER E CFO  
2055 REYKO ROAD  
SUITE 101  
JACKSONVILLE, FL 32207 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:** TREA  
**Name:** HENDERSON, M F  
**Address:** 4455 GOODBYS HIDEAWAY DR. N.  
**City-St-Zip:** JACKSONVILLE, FL 32217

**Title:** PRES  
**Name:** DANFORD, RICHARD  
**Address:** 903 W. UNION STREET  
**City-St-Zip:** JACKSONVILLE, FL 32204

**Title:** SECR  
**Name:** DUSS, ROBERT V  
**Address:** 1050 RIVERSIDE AVENUE  
**City-St-Zip:** JACKSONVILLE, FL 32204

**Title:** VP  
**Name:** MASTER, ESMIN M  
**Address:** 9713 CARBONDALE DR. EAST  
**City-St-Zip:** JACKSONVILLE, FL 32208

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:** ED MCCALL

CFO

01/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date