

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767310

FILED
Apr 18, 2012
Secretary of State

Entity Name: FLORIDA ADULT DAY SERVICES ASSOCIATION, INC.

Current Principal Place of Business:

5200 NW 43RD ST
102 PMB-310
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

5200 NW 43RD ST
102 PMB-310
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-2283155 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

O'CONNOR, VIRGINIA
694 14TH STREET
VERO BEACH, FL 32960 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: VP
Name: MCKAY, VILMA
Address: 1750 EAST HALLANDALE BEACH BLVD
City-St-Zip: HALLANDALE BEACH, FL 33009 US

Title: TREA
Name: SCHINDLER, ALICIA
Address: 5200 NE 2ND AVENUE
City-St-Zip: MIAMI, FL 33137 US

Title: SEC
Name: MCKAY, MARYJO
Address: P.O. BOX 1110
City-St-Zip: TAMPA, FL 33601 US

Title: PRES
Name: O'CONNOR, VIRGINIA
Address: 694 14TH STREET
City-St-Zip: VERO BEACH, FL 32960 US

Title: PAST
Name: RADCLIFFE, RON
Address: 800 NORTHPOINT PARKWAY, SUITE 101-B
City-St-Zip: WEST PALM BEACH, FL 33407

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: ALICIA SCHINDLER

TREA

04/18/2012

Electronic Signature of Signing Officer or Director

Date