2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2010
Secretary of State

DOCUMENT# N02000007702

Entity Name: SURVIVORS OF SUICIDE OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

199 GOVERNORS RD
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

199 GOVERNORS RD
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 11-3659531 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, DEBORAH A
199 GOVERNORS RD
PONTE VEDRA BEACH, FL 32082 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: D
Name: INMAN, WILLIAM O III
Address: 199 GOVERNORS RD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D
Name: O'CONNOR, JOHN
Address: 199 GOVERNORS RD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D
Name: DAVIS, DEBORAH A
Address: 199 GOVERNORS RD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D
Name: ZIPPERER, ROBERTA
Address: 199 GOVERNORS RD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: DEBORAH DAVIS DIR 04/09/2010

Electronic Signature of Signing Officer or Director — Date