2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2012
Secretary of State

DOCUMENT# N03000003111

Entity Name: THE FLORIDA FAMILY NETWORK, INC.

Current Principal Place of Business:

400 GAITHER DR
TALLAHASSEE, FL 32305

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6129
TALLAHASSEE, FL 32314

New Mailing Address:

FEI Number: 41-2091332 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FINCH, SOKOYA
400 GAITHER DR
TALLAHASSEE, FL 32305 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: FINCH, SOKOYA
Address: 400 GAITHER DR
City-St-Zip: TALLAHASSEE, FL 32305

Title: D
Name: WESSOR, KHUFU
Address: 608 HAMPTON DR
City-St-Zip: TALLAHASSEE, FL 32310

Title: D
Name: LEWIS, KENDRA
Address: 1750 COMMERCE DR NW 1418
City-St-Zip: ATLANTA, FL 30318

Title: D
Name: HINES, JAMES
Address: 3816 S. LAKE TERRACE
City-St-Zip: MIRAMAR, FL 33023

Title: D
Name: BRYANT, JENELL
Address: 9789 JOHN FRANKLIN RD
City-St-Zip: TALLAHASSEE, FL 32305

Title: D
Name: HINSON, GERALD
Address: 203 LINCOLN ST
City-St-Zip: TALLAHASSEE, FL 32301

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: SOKOYA FINCH D 05/01/2012
Electronic Signature of Signing Officer or Director Date