

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007850

FILED
Apr 04, 2007
Secretary of State

Entity Name: SUWANNEE SOCIAL SERVICES, INC.

Current Principal Place of Business:

1220 SW WALKER AVE
SUITE 101
LIVE OAK, FL 32064

New Principal Place of Business:

Current Mailing Address:

PO BOX 535
LIVE OAK, FL 32064

New Mailing Address:

FEI Number: 20-1469855

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRELL, ANDREW M SR
1220 SW WALKER AVE
SUITE 101
LIVE OAK, FL 32064 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: P () Delete
Name: HARRELL, ANDREW M SR
Address: 10333 124TH STREET
City-St-Zip: LIVE OAK, FL 32060

Title: V () Delete
Name: HARRELL, LEAH P
Address: 10333 124TH STREET
City-St-Zip: LIVE OAK, FL 32060

Title: TS () Delete
Name: PALMER, JOHN C
Address: 13975 CR 136
City-St-Zip: LIVE OAK, FL 32060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TS (X) Change () Addition
Name: VANN, ELIZABETH
Address: 18919 136TH ST
City-St-Zip: LIVE OAK, FL 32060

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANDREW M HARRELL

P

04/04/2007

Electronic Signature of Signing Officer or Director

Date