2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2011
Secretary of State

DOCUMENT# N07000010530

Entity Name: ALLIANCE FOR A HEALTHY FLORIDA, INC.

Current Principal Place of Business:

526 E PARK AVE 1ST FLOOR
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

P O BOX 1491
TALLAHASSEE, FL 32302

New Mailing Address:

FEI Number: 26-1321712 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MOHLER, MATT
526 E PARK AVE 1ST FLOOR
TALLAHASSEE, FL 32301 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: HANDLEY, JAMES
Address: 526 E PARK AVE 1ST FLOOR
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: BURT-STEWART, MIYA
Address: 526 E PARK AVE 1ST FLOOR
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: LUMPKIN, BARBARA
Address: 526 E PARK AVE 1ST FLOOR
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: JAMES HANDLEY D 04/29/2011

Electronic Signature of Signing Officer or Director Date