

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010747

FILED
Apr 19, 2012
Secretary of State

Entity Name: ONE POSITIVE PLACE, INC.

Current Principal Place of Business:

1804 FLOWER AVENUE
PANAMA CITY, FL 32405 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 203
LYNN HAVEN, FL 32444 US

New Mailing Address:

FEI Number: 37-1595973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACKSON, ROBERT C
304 MAGNOLIA AVENUE
PANAMA CITY, FL 32401 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, P
Name: FOREHAND, KELLY
Address: 308 MEADOWOOD COURT
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D, V
Name: ASHLEY, LISA P
Address: 3970 CHARDONNAY DRIVE
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: D
Name: KINARD, MICHELLE
Address: 1607 INVERNESS ROAD
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: D
Name: GAINER, TERRI
Address: 3002 E. THIRD STREET
City-St-Zip: PANAMA CITY, FL 32401 US

Title: D, T
Name: GALBREATH, STACIE
Address: 13920 ASHTON WAY
City-St-Zip: PANAMA CITY, FL 32409 US

Title: D, S
Name: LYON, ANN
Address: 2103 CORAL DRIVE
City-St-Zip: LYNN HAVEN, FL 32444 US

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: STACIE GALBREATH

T

04/19/2012

Electronic Signature of Signing Officer or Director

Date