2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005168

FILED Mar 20, 2012 Secretary of State

Entity Name: JOSEPH C. WATTS FAMILY CENTER & RESEARCH INSTITUTE, INC.

Current Principal Place of Business: New Principal Place of Business:

7798 MORDECAI COURT JACKSONVILLE, FL 32210

Current Mailing Address: New Mailing Address:

7798 MORDECAI COURT JACKSONVILLE, FL 32210

FEI Number: 27-2549507 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JAMES, ESHANDA A 7798 MORDECAI COURT JACKSONVILLE, FL 32210 US

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:

Γitle: PD

 Name:
 JAMES, ESHANDA A

 Address:
 7798 MORDECAI COURT

 City-St-Zip:
 JACKSONVILLE, FL 32210

Title: VPD

Name: CLAYTON, CASSANDRA
Address: 301 DANIEL AVE.
City-St-Zip: BROOKSVILLE, FL 34601

Title: VPD

Name: PERRY, SHEMELL

Address: 1577 CRABAPPLE CO E CT N City-St-Zip: JACKSONVILLE, FL 32225

Title: VPD

 Name:
 ALLEN, BARB

 Address:
 403 QUAPOW DR.

 City-St-Zip:
 RUSSELLVILLE, AR 72802

Title: VPD

Name: MONAGAN, SHARMON
Address: 4949 MOUNTAINSIDE TRAIL
City-St-Zip: STONE MOUNTAIN, GA 30083

Title: DAVF

 Name:
 RESHARD, KAREN

 Address:
 2448 CLEMSON RD.

 City-St-Zip:
 JACKSONVILLE, FL 32207

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: ESHANDA A JAMES CEO 03/20/2012