

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000005346

FILED
Mar 02, 2012
Secretary of State

Entity Name: EMPOWER OCALA OF MARION COUNTY, INC.

Current Principal Place of Business:

1827 NE 14TH STREET
OCALA, FL 34470 US

New Principal Place of Business:

Current Mailing Address:

1827 NE 14TH STREET
OCALA, FL 34470 US

New Mailing Address:

FEI Number: 45-2433605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUNSON, DREXEL T
4818 SE 10TH PLACE
OCALA, FL 34471 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: BRUNSON, DREXEL T
Address: 4818 SE 10TH PLACE
City-St-Zip: OCALA, FL 34471 US

Title: D VP
Name: MCKINNEY, ROYAL D
Address: 3122 NE 10TH STREET
City-St-Zip: OCALA, FL 34470 US

Title: D VP
Name: GAMBLE, JERONE A
Address: 2350 SE 110TH STREET
City-St-Zip: OCALA, FL 34480 US

Title: D T
Name: THOMPSON, T. CARL
Address: 4461 SE 106TH PLACE
City-St-Zip: BELLEVIEW, FL 34420 US

Title: D S
Name: THOMAS, PAMELA D
Address: 10710 SW 94TH COURT
City-St-Zip: OCALA, FL 34481 US

Title: D VP
Name: PETERS, ROBERT J
Address: 61 BANYAN COURSE
City-St-Zip: OCALA, FL 34472 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: DREXEL T BRUNSON

D P

03/02/2012

Electronic Signature of Signing Officer or Director

Date