2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14245

Entity Name: REGION IV HEAD START ASSOCIATION, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
615 S. HILL STREET ROOM 17 BUFORD, GA 30518	2795 MAIN STREET WEST BLDG 17 A/B SNELLVILLE, GA 30078

Current Mailing Address:	**New Mailing Address:**
P.O. BOX 409 BUFORD, GA 305150409 US	P O BOX 1049 SNELLVILLE, GA 30078

FEI Number: 61-1130751   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
FLORIDA HEAD START ASSOCIATION 949 DUNCAN ROAD SOUTH DAYTONA, FL 32119 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:

Title: DP
Name: GRAHAM, JUDY
Address: 170 SMITH LANE
City-St-Zip: SOUTH PITTSBURG, TN 37380

Title: DVP
Name: HALES, JOHN
Address: P O BOX 188
City-St-Zip: COLUMBIA, MS 39429

Title: DVP
Name: GRANT, PEGGY
Address: 1800 WEST FOURTH STREET
City-St-Zip: OWENSBORO, KY 42304

Title: DS
Name: FOSTER, NANCY
Address: 708 N. MAIN STREET
City-St-Zip: CLINTON, TN 37716

Title: DAS
Name: HUMPHREY, ANITA
Address: P O BOX 3975
City-St-Zip: HUNTSVILLE, AL 35810

Title: DT
Name: WHITE, DAVID
Address: P O BOX 685
City-St-Zip: HENDERSONVILLE, NC 28793

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: MYRA INGRAM   CEO   03/29/2012

Electronic Signature of Signing Officer or Director   Date