2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 20, 2012
Secretary of State

DOCUMENT# N18276

Entity Name: ALPHA-OMEGA CRISIS CENTER, INC.

Current Principal Place of Business:

140 DUNTY ROAD
LAKE PLACID, FL 33852 US

New Principal Place of Business:

Current Mailing Address:

140 DUNTY ROAD
LAKE PLACID, FL 33852 US

New Mailing Address:

FEI Number: 59-2844169 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LOPES, SANDRA JEAN
140 DUNTY ROAD
LAKE PLACID, FL 33852 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: DP
Name: LOPES, SANDRA JEAN
Address: 140 DUNTY ROAD
City-St-Zip: LAKE PLACID, FL 33852 US

Title: D
Name: HARTZELL, FRANK
Address: 404 HENSCRATCH ROAD
City-St-Zip: LAKE PLACID, FL 33852

Title: DV
Name: GUNSALUS, ROSETTA
Address: 913 SE 8TH AVENUE
City-St-Zip: OKEECHOBEE, FL 34972

Title: D
Name: ROW, KELLY
Address: 450 OHIO ST.
City-St-Zip: LAKE PLACID, FL 33852 US

Title: D
Name: WHITE, BARDIE
Address: 3975 SHELL RD
City-St-Zip: SARASOTA, FL 34242

Title: D
Name: ROUSH, DAWN
Address: 702 4TH STREET
City-St-Zip: NEW HAVEN, WV 25265

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: SANDRA JEAN LOPES DIR. 07/20/2012

Electronic Signature of Signing Officer or Director Date