

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47813

FILED
Feb 04, 2011
Secretary of State

Entity Name: THE SANCTUARY OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business:

120 EAST 8TH STREET
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 3301
JACKSONVILLE, FL 32206

New Mailing Address:

FEI Number: 59-3108041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATKINS, VICKY DIRECTO
120 EAST 8TH STREET
JACKSONVILLE, FL 32206 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: MR.
Name: ROSENBERG, MARK L PRESIDE
Address: 554 LOMAX STREET
City-St-Zip: JACKSONVILLE, FL 32204 US

Title: MR
Name: GEORGE, ROBERT VICE-PR
Address: 225 WATER STREET, #1500
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: MR.
Name: SIZEMORE, MARK TREASUR
Address: 4800 DEERWOOD CAMPUS, DCC-3-4
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: MRS.
Name: BARKSDALE, PATRICIA SECRETA
Address: 300 N HOGAN STREET STE 3300
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: REV.
Name: HOFF, WILLIAM CHAPLAI
Address: 8701 ARGYLE FOREST BLVD.
City-St-Zip: JACKSONVILLE, FL 32244 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: VICKY WATKINS

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02/04/2011

Electronic Signature of Signing Officer or Director

Date