

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001236

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** FAMILY NURTURING CENTER OF FLORIDA, INC.

**Current Principal Place of Business:**

2759 BARTLEY CIRCLE  
JACKSONVILLE, FL 32207 US

**New Principal Place of Business:**

**Current Mailing Address:**

2759 BARTLEY CIRCLE  
JACKSONVILLE, FL 32207 US

**New Mailing Address:**

**FEI Number:** 59-7004981

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, STELLA  
2759 BARTLEY CIRCLE  
JACKSONVILLE, FL 32207 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: PRES  
Name: MATHIS, SANDRA  
Address: 2759 BARTLEY CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VP  
Name: JOHNSON, SHARON  
Address: 2759 BARTLEY CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: SEC  
Name: BYLUND, CORRINE  
Address: 2759 BARTLEY CIRCLE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: ED  
Name: JOHNSON, STELLA  
Address: 2759 BARTLEY CIRCLE  
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: STELLA JOHNSON

ED

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date