

FILED
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Secretary of State

3/15

03-15-2004 90078 026 ****61.25

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N94000002799			
1. Entity Name ST. JOHNS RIVER RURAL HEALTH NETWORK, INC.			
Principal Place of Business C/O CHERYLL LESNESKI 2801 KENNEDY STREET PALATKA, FL 32177-4100		Mailing Address C/O CHERYLL LESNESKI 2801 KENNEDY STREET PALATKA, FL 32177-4100	
2. Principal Place of Business		3. Mailing Address	
Suits, Apt. #, etc.		Suits, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. FEI Number 59-3248588		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HEALTH PLANNING COUNCIL OF NE FLA, INC LORI A. BILELLO 900 UNIVERSITY BLVD, N. STE 110 JACKSONVILLE, FL 32211		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ Signature typed or printed name of registered agent and date if not applicable (NOTE: Registered Agent signature required when necessary)			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE	NAME	TITLE	NAME
DP	CHAPMAN, NICK	Vice President	Kaufman, Jessica
STREET ADDRESS	1305 IDLEWILDE AVE	STREET ADDRESS	1846 Holsonback Dr.
CITY-ST-ZIP	GREEN COVE SPRINGS, FL 32043	CITY-ST-ZIP	Daytona Beach, FL 32100
TITLE	NAME	TITLE	NAME
OV	CRIPPEN, WILLIAM O		Cauch, Laury
STREET ADDRESS	301 SO LEMON ST	STREET ADDRESS	2801 Kennedy St.
CITY-ST-ZIP	BUNNELL, FL 32110	CITY-ST-ZIP	Palatka, FL 32177
TITLE	NAME	TITLE	NAME
DS	DUNLAVEY, KERRY	President	
STREET ADDRESS	657 90 6TH ST	STREET ADDRESS	
CITY-ST-ZIP	MACCLENNY, FL 32083	CITY-ST-ZIP	
TITLE	NAME	TITLE	NAME
OT	HUDSON, DOTTIE		
STREET ADDRESS	1955 US #1 SO	STREET ADDRESS	
CITY-ST-ZIP	SAINT AUGUSTINE, FL 32086	CITY-ST-ZIP	
TITLE	NAME	TITLE	NAME
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	NAME	TITLE	NAME
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.			
SIGNATURE: <u>Larry E. Dunlavy</u>		Date: <u>3/4/04</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR		Date	

66413414



Attachment

6/4/34/4
N94000002799

2004 Not-For-Profit Corporation Annual Report

Additions/Changes to Officers and Directors:

President

Dunlavey, Kerry

480 West Lowder Street

Macclenny, FL 32063

Vice President

Kaufman, Jessica

1845 Holsonback Drive

Daytona Beach, FL 32120

Director

Gauch, Laurey

2801 Kennedy St.

Palatka, FL 32177

(same)

Treasurer

Hudson, Dottie

1955 US #1 South

Saint Augustine, FL 32086