

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004945

FILED
Mar 16, 2012
Secretary of State

Entity Name: COUNCIL OF SOCIAL AGENCIES OF ST. LUCIE COUNTY, INC.

Current Principal Place of Business:

2550 SE WALTON RD
PORT ST LUCIE, FL 34952

New Principal Place of Business:

400NW SUNVIEW WAY
PORT ST LUCIE, FL 34986

Current Mailing Address:

P.O. BOX 2356
FORT PIERCE, FL 34954

New Mailing Address:

FEI Number: 65-0235448

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIOTT, PAUL
5500 SAINT LUCIE BLVD
FORT PIERCE, FL 34946 US

Name and Address of New Registered Agent:

EMBRY, MARIANNE
400 NW SUNVIEW WAY
PORT ST LUCIE, FL 34986 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: MARIANNE EMBRY

03/16/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: ROBERTS, DONNA
Address: 3209 VIRGINIA AVE
City-St-Zip: FORT PIERCE, FL 34981

Title: TREA
Name: EMBRY, MARIANNE
Address: 400 NW SUNVIEW WAY
City-St-Zip: PORT ST LUCIE, FL 34986

Title: SECT
Name: ADAMS, CHRIS
Address: P.O.BOX 2356
City-St-Zip: FORT PIERCE, FL 34954

Title: VP
Name: MEYERS, STEFANIE
Address: P. O. BOX 2356
City-St-Zip: FORT PIERCE, FL 34954

Title: D
Name: FARNELL, THERESA
Address: P O BOX 2356
City-St-Zip: FORT PIERCE, FL 34954

Title: D
Name: MOLAN, LOREN
Address: PO BOX 2356
City-St-Zip: FORT PIERCE, FL 34954

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: MARIANNE EMBRY

TREA

03/16/2012

Electronic Signature of Signing Officer or Director

Date