

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001222

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** FLORIDA NETWORK OF CHILDREN'S ADVOCACY CENTERS, INC.

**Current Principal Place of Business:**

2940 EAST PARK AVENUE  
SUITE A  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

2940 EAST PARK AVENUE  
SUITE A  
TALLAHASSEE, FL 32301

**New Mailing Address:**

**FEI Number:** 59-3496460      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KNIGHT, JOHN M  
2940 EAST PARK AVENUE  
SUITE A  
TALLAHASSEE, FL 32301 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: PD  
Name: HURST, JULIE  
Address: PO BOX 1237  
City-St-Zip: NICEVILLE, FL 32588

Title: VD  
Name: KITCHENS, SHERRY  
Address: P.O. BOX 1128  
City-St-Zip: GAINESVILLE, FL 32602

Title: TD  
Name: TURNER, JILL  
Address: 3900 BROADWAY STE. B-1  
City-St-Zip: FORT MYERS, FL 33901

Title: CEO  
Name: KNIGHT, JOHN M  
Address: 2940 EAST PARK AVENUE, SUITE A  
City-St-Zip: TALLAHASSEE, FL 32301

Title: DAL  
Name: THOMAS, TERRY  
Address: 2331 PHILLIPS ROAD  
City-St-Zip: TALLAHASSEE, FL 32308

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: JOHN M. KNIGHT

CEO

03/12/2012

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

\_\_\_\_\_  
Date