

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005375

FILED
Apr 22, 2011
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF HOMES FOR THE AGING HEALTH AND SERVICES CORP.

Current Principal Place of Business:

1812 RIGGINS ROAD
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

1812 RIGGINS ROAD
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 59-3422660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOYD, JANE GALE
1812 RIGGINS ROAD
TALLAHASSEE, FL 32308 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: C
Name: CUNLIFFE, TERRI CHAIR
Address: 9215 W. BROWARD BLVD., SUITE 100
City-St-Zip: PLANTATION, FL 33324 US

Title: PC
Name: BALLARD, ALMA P-CHAIR
Address: 134 E. CHURCH STREET
City-St-Zip: JACKSONVILLE, FL 32202 US

Title: S
Name: BERGER, LITHA SEC
Address: 435 NE 34TH STREET
City-St-Zip: MIAMI, FL 33137 US

Title: T
Name: COXSON, CHARLES W TREAS
Address: 7700 W. CAMINO REAL BLVD., SUITE 300
City-St-Zip: BOCA RATON, FL 33433 US

Title: CE
Name: MESERVE, JOHN S. CHELECT
Address: ONE FLEET LANDING BLVD.
City-St-Zip: ATLANTIC BEACH, FL 32233 US

Title: D
Name: ROBARE, BRIAN
Address: 1001 CARPENTER WAY
City-St-Zip: LAKE LAND, FL 33809

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: JANE GALE BOYD

CEO

04/22/2011

Electronic Signature of Signing Officer or Director

Date