

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003990

FILED
Mar 29, 2012
Secretary of State

Entity Name: HEALING ARTS ALLIANCE OF THE BIG BEND, INC.

Current Principal Place of Business:

5300 TROUT TRAIL
TALLAHASSEE, FL 32311 US

New Principal Place of Business:

Current Mailing Address:

5300 TROUT TRAIL
TALLAHASSEE, FL 32311 US

New Mailing Address:

FEI Number: 59-3596412

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGRAM, SPENCER
118 SALEM COURT
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: P
Name: HOWELL, J. SUSANNE
Address: 9601 MICCOSUKEE RD
City-St-Zip: TALLAHASSEE, FL 32309

Title: VP
Name: HANKS, LESLIE
Address: 1430 N RANDOLPH CIR
City-St-Zip: TALLAHASSEE, FL 32308

Title: TR
Name: CUNNINGHAM, CAROL
Address: 5300 TROUT TRAIL
City-St-Zip: TALLAHASSEE, FL 32311

Title: S
Name: WESTMORELAND, VICKI
Address: 521 E COLLEGE AVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: FERRALL, RICK
Address: 521 E COLLEGE AVE
City-St-Zip: TALLAHASSEE, FL 32301

Title: D
Name: REESOR, NORMA
Address: 847 EAST PARK AVE
City-St-Zip: TALLAHASSEE, FL 32301

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: CAROL CUNNINGHAM

TR

03/29/2012

Electronic Signature of Signing Officer or Director

Date