

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000046873

FILED
Mar 26, 2011
Secretary of State

Entity Name: NORTH POINT COMMUNITY RESIDENTIAL FACILITY, INC

Current Principal Place of Business:

1937 COLLEGE CIRCLE NORTH
JACKSONVILLE, FL 32209

New Principal Place of Business:

Current Mailing Address:

1937 COLLEGE CIRCLE NORTH
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 27-2809735

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MILLS, MARILYN B PRES
1937 COLLEGE CIRCLE NORTH
JACKSONVILLE, FL 32209 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: PRES
Name: MILLS, MARILYN B PRES
Address: 1937 COLLEGE CIRCLE NORTH
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP
Name: MILLS, FENNICE VP
Address: 1937 COLLEGE CIRCLE NORTH
City-St-Zip: JACKSONVILLE, FL 32209

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARILYN MILLS

PRES

03/26/2011

Electronic Signature of Signing Officer or Director

Date