## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000030730

Entity Name: FAMILY RESOURCES INC.

FILED Jan 18, 2012 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1804 MICCOSUKEE COMMONS DR 2286 WEDNESDAY ST.

STE 206 STE 1

TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32308

**Current Mailing Address: New Mailing Address:** 

1804 MICCOSUKEE COMMONS DR 2286 WEDNESDAY ST.

STE 206 STE 1

TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32308

FEI Number: 59-5379748 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CLEVENGER, LAURA A CLEVENGER, LAURA A 1804 MICCOSUKEE COMMONS DR 2286 WEDNESDAY ST. STE 1

STE 206

TALLAHASSEE, FL 32308 US TALLAHASSEE, FL 32308 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: 01/18/2012

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

CLEVENGER, LAURA A PHD Name:

8309 ELAN DR Address:

City-St-Zip: TALLAHASSEE, FL 32312

Title: VΡ

Name: ENGLE, DAN 2735 RAINTREE CR Address: TALLAHASSEE, FL 32308 City-St-Zip:

Title:

GALLAGHER, DEAN Name: 474 CONRAD HILLS RD Address: City-St-Zip: HAVANA, FL 32333

Title:

GALLAGHER, ERIN Name: Address: 474 CONRAD HILLS RD City-St-Zip: HAVANA, FL 32333

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.

Ρ SIGNATURE: LAURA A. CLEVENGER 01/18/2012