2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755964

Entity Name: THE ARC NORTH FLORIDA, INC.

Current Principal Place of Business:

511 GOLDKIST BLVD SW LIVE OAK, FL 32064

Current Mailing Address:

511 GOLDKIST BLVD SW LIVE OAK, FL 32064 US

FEI Number: 59-2064304 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE ARC NORTH FLORIDA, INC. 511 GOLDKIST BLVD SW LIVE OAK, FL 32064 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: BEVERLY STANDRIDGE 04/10/2024

Electronic Signature of Registered Agent

Date

FILED Apr 10, 2024

Secretary of State

3059310312CC

Officer/Director Detail:

Title ED Title DIRECTOR

Name STANDRIDGE, BEVERLY Name CLARK, JEANNETTE

Address 511 GOLDKIST BLVD, SW Address 14001 SR 51

City-State-Zip: LIVE OAK FL 32064 City-State-Zip: LIVE OAK FL 32060

Title DIRECTOR Title VP

Name GODWIN, GREG Name BARBER, JOEL

Address 207 NE 1ST ST, RM 106 Address 14328 LEON DOPSON RD City-State-Zip: JASPER FL 32052 City-State-Zip: SANDERSON FL 32087

Title DIRECTOR Title SECRETARY
Name SPENCER, HENRY Name BRICKER, ADAM

Address PO BOX 127 Address 9389 CR 136

City-State-Zip: JASPER FL 32052 City-State-Zip: LIVE OAK FL 32060

TitleTREASURERTitlePRESIDENTNameMOOR, CHRISTINENameGAMBLE, RICKYAddress152 NW SILVERLEAF LANEAddress12314 BASS ROAD

City-State-Zip: LAKE CITY FL 32055 City-State-Zip: LIVE OAK FL 32060

Continues on page 2

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: BEVERLY STANDRIDGE EXECUTIVE DIREC

EXECUTIVE DIRECTOR 04/10/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name GRANTHAM, JACOB Address 8632 137TH ROAD

City-State-Zip: LIVE OAK FL 32060

Title DIRECTOR

Name KINSEY, JENNIFER Address 302 PINE AVE SW

City-State-Zip: LIVE OAK FL 32064

Title DIRECTOR

Name CORN, THOMAS

Address 9556 BLACK JACK ROAD

City-State-Zip: MACCLENNY FL 32063

Title DIRECTOR

Name CAMPBELL, MICHAEL

Address 16791 198TH ST.

City-State-Zip: MCALPIN FL 32062

Title DIRECTOR

Name BROWN, CLARA

Address 8575 CR 136A

City-State-Zip: LIVE OAK FL 32060