

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002213

Entity Name: PARTNERSHIP FOR STRONG FAMILIES, INC.

Current Principal Place of Business:

5950 NW 1ST PL
SUITE 300
GAINESVILLE, FL 32607

Current Mailing Address:

5950 NW 1ST PL
SUITE 300
GAINESVILLE, FL 32607 US

FEI Number: 03-0423150

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRIFFETH, GINGER
5950 NW 1ST PL
SUITE 300
GAINESVILLE, FL 32607 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: GINGER GRIFFETH

01/23/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN
Name AYERS, KAY
Address 5950 NW 1ST PLACE
SUITE 300
City-State-Zip: GAINESVILLE FL 32607

Title CEO/PRESIDENT
Name GRIFFETH, GINGER
Address 5950 NW 1ST PL
SUITE 300
City-State-Zip: GAINESVILLE FL 32607

Title SECRETARY
Name BRIGHTON, KENNY
Address 5950 NW 1ST PLACE
SUITE 300
City-State-Zip: GAINESVILLE FL 32607

Title CHAIR ELECT
Name MITCHELL, ELIZABETH
Address 5950 NW 1ST PL
SUITE 300
City-State-Zip: GAINESVILLE FL 32607

Title CHIEF OF STAFF
Name WEAVER, JAMES
Address 5950 NW 1ST PLACE, SUITE 300
City-State-Zip: GAINESVILLE FL 32607

Title TREASURER
Name JOPLING, GUY
Address 5950 NW 1ST PLACE, SUITE 300
City-State-Zip: GAINESVILLE FL 32607

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: GINGER GRIFFETH

CEO/PRESIDENT

01/23/2024

Electronic Signature of Signing Officer/Director Detail

Date