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: MARILYN MOORE

L

City-State-Zip: FORT LAUDERDALE FL 33311

Electronic Signature of Signing Officer/Director Detail

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:

Officer/Director Detail :					
Title	D	Title	D		
Name	MOORE, MARILYN	Name	HARRIS, WINNIFRED		
Address	2571 NW 16TH STREET	Address	2571 NW 16TH STREET		
City-State-Zip:	FORT LAUDERDALE FL 33311	City-State-Zip:	FORT LAUDERDALE FL 33311		
Title	D				
Name	TAYLOR, ALBERTA				
Address	2571 NW 16TH STREET				

Electronic Signature of Registered Agent

# Name and Address of Current Registered Agent:

MOORE, MELISA 2571 NW 16TH STREET FORT LAUDERDALE, FL 33311 US

## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N0300007966

Entity Name: NANCY EDWARDS FAMILY SERVICES, INC.

### **Current Principal Place of Business:**

2571 NW 16TH STREET FORT LAUDERDALE, FL 33311

### **Current Mailing Address:**

2571 NW 16TH STREET FORT LAUDERDALE. FL 33311

### FEI Number: 73-1696807

Certificate of Status Desired: No

Date

FILED Jun 30, 2020 Secretary of State 0939841682CC

OWNER