

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000007966

**FILED**  
**Apr 30, 2018**  
**Secretary of State**  
**CC1587324377**

**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

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

MOORE, MELISA  
2571 NW 16TH STREET  
FORT LAUDERDALE, FL 33311 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title D  
Name MOORE, MARILYN  
Address 2571 NW 16TH STREET  
City-State-Zip: FORT LAUDERDALE FL 33311

Title D  
Name HARRIS, WINNIFRED  
Address 2571 NW 16TH STREET  
City-State-Zip: FORT LAUDERDALE FL 33311

Title D  
Name TAYLOR, ALBERTA  
Address 2571 NW 16TH STREET  
City-State-Zip: FORT LAUDERDALE FL 33311

*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

**DIRECTOR**

**04/30/2018**

Electronic Signature of Signing Officer/Director Detail

Date