2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400001594

Entity Name: FORD FAMILY AND WELFARE ASSOCIATION, CORP

FILED Feb 09, 2019 Secretary of State 4619947020CC

Current Principal Place of Business:

12739 CARON DR

JACKSONVILLE, FL 32258

Current Mailing Address:

12739 CARON DR

JACKSONVILLE, FL 32258

FEI Number: 59-3262251 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FORD, OZELL 12739 CARON DR JACKSONVILLE, FL 32258 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 Title D

NameFORD, OZELLNameNELSON, JIMMY JRAddress12739 CARON DRAddress631 BLENHEIM LOOP

City-State-Zip: JACKSONVILLE FL 32258 City-State-Zip: WINTER SPRINGS FL 32708

Title T Title S

NameFORD, ROBERT INameGILES, VERONICA LAddress8896 135TH LOOPAddress2017 DISCOVERY CIR

City-State-Zip: LIVE OAK FL 32060 City-State-Zip: DEERFIELD BEACH FL 33442

Title D

Name BROWN, SHELLIE

Address 3206 STONE BRIER RIDGE DRIVE

City-State-Zip: ORANGE PARK FL 32065

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: OZELL FORD DIRECTOR 02/09/2019