

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008830

Entity Name: ART WITH A HEART IN HEALTHCARE, INC.**Current Principal Place of Business:**841 PRUDENTIAL DRIVE
SUITE 150
JACKSONVILLE, FL 32207**Current Mailing Address:**841 PRUDENTIAL DRIVE
SUITE 150
JACKSONVILLE, FL 32207 US**FEI Number: 26-1313805****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CURLEY, CHARLES RESQ.
1301 RIVERPLACE BOULEVARD
SUITE 1500
JACKSONVILLE, FL 32207 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	SECRETARY
Name	CANNON, BROOKS
Address	3 PALMWOOD COURT
City-State-Zip:	JACKSONVILLE BEACH FL 32250

Title	BOD
Name	GUTHRIE, JENNIFER
Address	1870 CHALLEN AVE
City-State-Zip:	JACKSONVILLE FL 32205

Title	BOD
Name	LAIRD
Address	830-13 A1A NORTH, #127
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	TREASURER
Name	POWELL, JUDY
Address	12509 AYRSHIRE ST E
City-State-Zip:	JACKSONVILLE FL 32226

Title	CEO
Name	PONDER, CHRISTY
Address	841 PRUDENTIAL DRIVE SUITE 150
City-State-Zip:	JACKSONVILLE FL 32207

Title	BOD
Name	WHITAKER, HILLARY
Address	240 A1A N #13
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	BOD
Name	WHITAKER, HILLARY
Address	240 A1A N #13
City-State-Zip:	PONTE VEDRA BEACH FL 32082

Title	BOD
Name	ANDEER, CASEY
Address	51 WATERBRIDGE PLACE
City-State-Zip:	PONTE VEDRA BEACH FL 32082

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: LORI PRESTO**PROGRAM DIRECTOR****01/15/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date