

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010334

Entity Name: THE DIVISION FOR PHYSICAL, HEALTH AND MULTIPLE DISABILITIES, INC.

Current Principal Place of Business:

121 OXFORD SQUARE
CARROLLTON, GA 30117

Current Mailing Address:

121 OXFORD SQUARE
CARROLLTON, GA 30117 US

FEI Number: 26-3704935

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DELOACH, PAMELA
6711 SPANISH MOSS CIRCLE
TAMPA, FL 33625 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 P
Name JASINIECKI, MELISSA
Address 510 OXFORD CIRCLET
City-State-Zip: SCHERERVILLE IN 46375

Title T
Name COOPER, MARGARET A
Address 121 OXFORD SQUARE
City-State-Zip: CARROLLTON GA 30117

Title VP
Name KUNTZLER, PATRICE
Address HENRY VISCARDI SCHOOL AT THE
VISCARDI CENTER
201 I.U. WILLETS RD.
City-State-Zip: ALBERTSON NY 11507

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: MARGARET A. COOPER

TREASURER

03/10/2014

Electronic Signature of Signing Officer/Director Detail

Date