

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12000006372

Entity Name: HEALTHY START MOMCARE NETWORK, INC.

FILED
Apr 20, 2015
Secretary of State
CC2361636964

Current Principal Place of Business:

1311 NORTH PAUL RUSSELL ROAD
SUITE D204
TALLAHASSEE, FL 32301

Current Mailing Address:

1311 NORTH PAUL RUSSELL ROAD
SUITE D204
TALLAHASSEE, FL 32301

FEI Number: 46-1801239

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CLARKE, DAWN
1311 NORTH PAUL RUSSELL ROAD
SUITE D204
TALLAHASSEE, FL 32301 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 PRESIDENT
Name ZIMMERMAN, MARTHA
Address 5907 BERRYHILL ROAD
City-State-Zip: MILTON FL 32570

Title VP
Name FLOYD, JENNIFER
Address P.O.BOX 560868
City-State-Zip: ROCKLEDGE FL 32956

Title TREASURER
Name MORGESE, DIXIE
Address 109 EXECUTIVE CIRCLE
City-State-Zip: DAYTONA BEACH FL 32114

Title BOARD MEMBER
Name FERMIN, MANUEL E
Address 7205 N. W. 19TH STREET
 SUITE 500
City-State-Zip: MIAMI FL 33126

Title SECRETARY
Name SUTHERLAND, LINDA
Address 600 COURTLAND ST
 SUITE 565
City-State-Zip: ORLANDO FL 32804

Title AT-LARGE
Name TIMUTA, CATHY
Address 1921 JEFFERSON AVE
City-State-Zip: FORT MYERS FL 33901

Title BOARD MEMBER
Name ANDERSON, JOY
Address P.O. BOX 1321
City-State-Zip: QUINCY FL 32353

Title BOARD MEMBER
Name BERRY, SCOTT
Address 101 SE CENTRAL PARKWAY
City-State-Zip: STUART FL 34994

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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: MARTHA ZIMMERMAN

PRESIDENT

04/20/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title BOARD MEMBER
Name CAIN, KATHLEEN
Address 333 17TH ST.
2R
City-State-Zip: VERO BEACH FL 32960

Title BOARD MEMBER
Name GOLDWIRE, KRISTY
Address 1311 N. PAUL RUSSEL ROAD
City-State-Zip: TALLAHASSEE FL 32301

Title BOARD MEMBER
Name OWENS, SHARON
Address 907 CHERRY ST
City-State-Zip: PANAMA CITY FL 32401

Title BOARD MEMBER
Name EDWARDS, CHARLENE
Address 650 E. DAVIDSON ST
City-State-Zip: BARTOW FL 33830

Title BOARD MEMBER
Name MURPHY, JANE
Address 2806 N. ARMENIA AVE
100
City-State-Zip: TAMPA FL 33607

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Address 650 E. DAVIDSON ST
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