2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000009423

Entity Name: SUNDAY'S CHILD, INC.

Current Principal Place of Business: 215 WEST JACKSON STREET

215 WEST JACKSON STREET PENSACOLA, FL 32501

Current Mailing Address:

PO BOX 12972

PENSACOLA, FL 32591 US

FEI Number: 46-3893491 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILKINSON, CORY H 215 WEST JACKSON STREET PENSACOLA, FL 32501 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: CORY WILKINSON 01/02/2020

Electronic Signature of Registered Agent

Date

FILED Jan 02, 2020

Secretary of State

1933911609CC

Officer/Director Detail:

Title PRESIDENT Title VP

NameRHODES, GARYNameKING, TRUDYAddress609 N. 10TH AVENUEAddress8911 EGRET LANE

City-State-Zip: PENSACOLA FL 32501 City-State-Zip: LILLIAN AL 36549

 Title
 TREASURER
 Title
 DIRECTOR

 Name
 WILKINSON, CORY
 Name
 IBURG, BOOTH

 Address
 215 WEST JACKSON STREET
 Address
 1119 PARK LANE

City-State-Zip: PENSACOLA FL 32501 City-State-Zip: GULF BREEZE FL 32563

Title **SECRETARY** Title **DIRECTOR** Name DECKER, KATHY Name MATHEWS, SAM Address 618 LAKEWOOD RD Address 5420 LIMESTONE ROAD City-State-Zip: PENSACOLA FL 32507 PENSACOLA FL 32504 City-State-Zip:

TitleIMMEDIATE PAST PRESIDENTTitleDIRECTORNamePRESTI, CHUCKNameHECHT, MARLA

Address 416 E. GOVERNMENT STREET Address 4503 SOUTHPOINTE LN.

City-State-Zip: PENSACOLA FL 32502 City-State-Zip: PENSACOLA FL 32514

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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: KATHY DECKER SECRETARY 01/02/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name ARD, DAVID Name YOSHIHASHI, ANN

Address 1221 DUNMIRE ST Address 304 PORT ROYAL WAY

City-State-Zip: PENSACOLA FL 32504 City-State-Zip: PENSACOLA FL 32502

Title DIRECTOR Title DIRECTOR

NameBURGESS-ROCHE, JUSTINNameHENDERSON, CHIPAddress2316 ARRIVISTE WAYAddress2210 N. 61ST AVENUECity-State-Zip:PENSACOLA FL 32504City-State-Zip:PENSACOLA FL 32506

Title DIRECTOR Title DIRECTOR

NameCOSENTINO, JACEYNameGORDON, PHILLIPAddress10070 BEULAH ROADAddress20 SEASHORE DR.City-State-Zip:PENSACOLA FL 32526City-State-Zip:PENSACOLA FL 32561

TitleDIRECTORTitlePAST PRESIDENTNameRILEY, MICHELLENameBUCHANAN, DREW

Address 5873 ARCH AVE. Address 211 S. FLORISA BLANCA ST.

City-State-Zip: PENSACOLA FL 32526 City-State-Zip: PENSACOLA FL 32502