

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000012644

Entity Name: WELLSRING FOUNDATION, INC.

Current Principal Place of Business:

ATTN: AARON COCH
220 SOUTH HANSELL STREET
THOMASVILLE, GA 31792

Current Mailing Address:

ATTN: AARON COCH
220 SOUTH HANSELL STREET
THOMASVILLE, GA 31792

FEI Number: 82-3811182

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 PD
Name WILLIAMS, MARK E
Address 220 SOUTH HANSELL STREET
City-State-Zip: THOMASVILLE GA 31792

Title VD
Name WILLIAMS, LAURA M
Address 220 SOUTH HANSELL STREET
City-State-Zip: THOMASVILLE GA 31792

Title STD
Name WILLIAMS, DYLAN P
Address 220 SOUTH HANSELL STREET
City-State-Zip: THOMASVILLE GA 31792

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: LAURA M WILLIAMS

D

05/01/2021

Electronic Signature of Signing Officer/Director Detail

Date