

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20484

Entity Name: WASHINGTON-HOLMES TECHNICAL CENTER FOUNDATION, INC.**FILED**
Mar 10, 2018
Secretary of State
CC6547116434**Current Principal Place of Business:**757 HOYT ST.
CHIPLEY, FL 32428**Current Mailing Address:**POST OFFICE BOX 180
CHIPLEY, FL 32426-0180 US**FEI Number: 59-2810664****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TOWN, JAMES A
4116 ADLER COURT
CHIPLEY, FL 32428 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: JAMES A. TOWN****03/10/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	C
Name	TOWN, JAMES A
Address	POST OFFICE BOX 180
City-State-Zip:	CHIPLEY FL 32428-0180

Title	S
Name	CORBIN, ZENNA
Address	P.O. BOX 180
City-State-Zip:	CHIPLEY FL 32428-0180

Title	DIRECTOR
Name	FINCH, DANNY
Address	871 FALLING WATERS ROAD
City-State-Zip:	CHIPLEY FL 32428

Title	DIRECTOR
Name	BAILEY, WARREN
Address	DOCTORS MEMORIAL HOSPITAL 2600 HOSPITAL DRIVE PHARMACY DIRECTOR
City-State-Zip:	BONIFAY FL 32425

Title	DIRECTOR
Name	BROCK, VANN
Address	936 INDUSTRIAL DRIVE
City-State-Zip:	CHIPLEY FL 32428

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: JAMES A TOWN**CHAIRMAN****03/10/2018**

Electronic Signature of Signing Officer/Director Detail

Date