

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46306

FILED
Jan 13, 2015
Secretary of State
CC7762208507

Entity Name: SUWANNEE RIVER AREA HEALTH EDUCATION CENTER, INC.

Current Principal Place of Business:

14646 NW 151ST BLVD
ALACHUA, FL 32615

Current Mailing Address:

14646 NW 151ST BLVD
ALACHUA, FL 32615

FEI Number: 59-3112649

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MESH, MARILYN
14646 NW 151ST BLVD
ALACHUA, FL 32615 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 VP, TREASURER
Name FORTNER, SCOTT
Address 3000 NW 83RD ST, W-002
City-State-Zip: GAINESVILLE FL 32606

Title PRESIDENT
Name REYNOLDS, AMIE
Address 1801 N TEMPLE AVE
City-State-Zip: STARKE FL 32091

Title SECRETARY
Name JOHNS, LINDA
Address PO BOX 1223
City-State-Zip: STARKE FL 32091

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: AMIE REYNOLDS

PRESIDENT

01/13/2015

Electronic Signature of Signing Officer/Director Detail

Date