Entity Name: ALTRUSA INTERNATIONAL OF OCALA FOUNDATION, INC.

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

C/O CONNIE LARSEN 6978 SE 12TH CIRCLE

DOCUMENT# N48939

Current Mailing Address:

P O BOX 4228 OCALA, FL 32678

OCALA, FL 34480

FEI Number: 59-3126926

Name and Address of Current Registered Agent:

FORD, BRENDA 1900 SE 18TH AVE OCALA, FL 34471 US Certificate of Status Desired: No

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

Officer/Director Detail :

Officer/Director Detail :				
Title	CHAIRMAN	Title	TREASURER	
Name	SMITH, MICHELLE	Name	LARSEN, CONSTANCE	
Address	2050 SE 37TH COURT CIR	Address	6978 SE 12TH CIRCLE	
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34480	
T '41-		Title		
Title	DIRECTOR	litte	DIRECTOR	
Name	BARRINEAU, DIANE	Name	FORSTER, VALERIE	
Address	1309 SE 25TH LOOP, #103	Address	938 NE 7TH STREET	
City-State-Zip:	OCALA FL 34471	City-State-Zip:	OCALA FL 34470	
Title	DIRECTOR	Title	DIRECTOR	
Name	TICE, SCOTT	Name	LANDT, MARY C	
Address	8590 SW 66TH TERRACE	Address	230 NE 25TH AVENUE SUITE 200	
City-State-Zip:	OCAKA FL 34476	City-State-Zip:	OCALA FL 34470	

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: CONSTANCE LARSEN

TREASURER

01/11/2015

Date

Electronic Signature of Signing Officer/Director Detail

Date