

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50256

**Entity Name:** CHIPOLA HEALTHY START, INC.**Current Principal Place of Business:**2944 PENN AVE.  
SUITE A  
MARIANNA, FL 32448**Current Mailing Address:**2944 PENN AVE.  
SUITE A  
MARIANNA, FL 32448 US**FEI Number:** 59-3141101**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THERESA, HARRISON R  
2944 PENN AVE.  
SUITE A  
MARIANNA, FL 32448 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:** THERESA R HARRISON

01/26/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN  
Name GRANBERRY, CHEPHUS  
Address P.O. BOX 6185  
City-State-Zip: MARIANNA FL 32447

Title DIRECTOR  
Name JACKSON, CYNDI  
Address 301 NORTH OKLAHOMA STREET  
City-State-Zip: BONIFAY FL 32425

Title TREASURER  
Name CORBUS, JUDY  
Address 1424 JACKSON AVE.  
SUITE A  
City-State-Zip: CHIPLEY FL 32428

Title DIRECTOR  
Name CHAMBERLAIN, MELISSA  
Address 27442 NE CR 69A  
City-State-Zip: ALTHA FL 32421

Title CEO  
Name HARRISON, THERESA R  
Address 4930 DOGWOOD DRIVE  
City-State-Zip: MARIANNA FL 32446

Title DIRECTOR  
Name WEBB, BRIANA  
Address 1150 CLOVERDALE RD.  
City-State-Zip: GRACEVILLE FL 32440

Title DIRECTOR  
Name LEE, MYLISA  
Address 117 S. WAUKESHA ST.  
City-State-Zip: BONIFAY FL 32425

Title DIRECTOR  
Name WALDORFF, JORDAN  
Address 11078 NW LAKE MYSTIC DUGGER RD.  
City-State-Zip: BRISTOL FL 32321

**Continues on page 2**

*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:** THERESA HARRISON

EXECUTIVE DIRECTOR

01/26/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	SANSOM, BROOKE
Address	16783 NW EG BUCK LARKINS RD.
City-State-Zip:	BRISTOL FL 32321