| Current Principal Place of Business:   |  |                 | 663011014432                       |            |
|--|--|-----------------|------------------------------------|------------|
| 169 DOGWOOD LANE   |  |                 |                                    |            |
| JACKSBORO,   | TN 37757   |                 |                                    |            |
| Current Mailing Address:   |  |                 |                                    |            |
| 169 DOGWOOD LANE   |  |                 |                                    |            |
| JACKSBOR   | D, TN 37757 US   |                 |                                    |            |
| FEI Number: 59-3242756   |  |                 | Certificate of Status Desired: Yes |            |
| Name and Address of Current Registered Agent:  |  |                 |                                    |            |
| CRAWFORD, JOHN R. ATTY<br>1200 RIVERPLACE BOULEVARD  |  |                 |                                    |            |
| SUITE 800<br>JACKSONVILLE, FL 32207 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  | SOUTH STATES |                 |                                    | 01/15/2017 |
|  | Electronic Signature of Registered Agent   |                 |                                    | Date       |
| Officer/Director Detail :  |  |                 |                                    |            |
| Title  | PD   | Title           | S                                  |            |
| Name   | FAHY, THOMAS M   | Name            | FAHY, KATHERINE M                  |            |
| Address  | 169 DOGWOOD LANE   | Address         | 169 DOGWOOD LANE                   |            |
| City-State-Zip:  | JACKSBORO TN 37757   | City-State-Zip: | JACKSBORO TN 37757                 |            |
| Title  | TD   | Title           | D                                  |            |
| Name   | ELLISON, FRANCES A   | Name            | OWEN, HUGH                         |            |
| Address  | 166 DOGWOOD LANE   | Address         | 952 KELLY RD                       |            |
| City-State-Zip:  | JACKSBORO TN 37757   | City-State-Zip: | MT JACKSON VA 22664                |            |
| Title  | D  | Title           | D                                  |            |
| Name   | VALENTINE, CHARLES   | Name            | LAWSON, GERALD                     |            |
| Address  | 100 NEPTUNE COURT  | Address         | 173 PETREY RD                      |            |
| City-State-Zip:  | PONTE VEDRA FL 32082   | City-State-Zip: | LAFOLLETE TN 37766                 |            |
| Title  | DIRECTOR   | Title           | DIRECTOR                           |            |
| Name   | BOREK, TODD A MR   | Name            | LAMBERT, MICHAEL MR                |            |
| Address  | 9844 KILKENNY DRIVE / BOX 735  | Address         | 250 MARTICVILLE RD                 |            |
|  | HAMBURG MI 48139   | City-State-Zip: | CONESTOGA PA 17516                 |            |
|  |  |                 |                                    |            |

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: THOMAS M FAHY

PRESIDENT

01/15/2017

Electronic Signature of Signing Officer/Director Detail

### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT FILED Jan 15, 2017 Secretary of State

CC5611614432

# Entity Name: THE LUISA PICCARRETA CENTER FOR THE DIVINE WILL, INC.

## (

DOCUMENT# N9400002621

Date