

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001485

Entity Name: THE ARC NORTH FLORIDA FOUNDATION, INC.**Current Principal Place of Business:**511 GOLDKIST BLVD SW
LIVE OAK, FL 32064**Current Mailing Address:**511 GOLDKIST BLVD SW
LIVE OAK, FL 32064**FEI Number:** 59-3385683**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE ARC NORTH FLORIDA FOUNDATION, INC.
511 GOLDKIST BLVD SW
LIVE OAK, FL 32064 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:** BEVERLY STANDRIDGE

03/18/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	LAKE, BOBBIE
Address	934 PINEVIEW CIRCLE SW
City-State-Zip:	LIVE OAK FL 32064

Title	ED
Name	STANDRIDGE, BEVERLY
Address	511 GOLDKIST BLVD. SW
City-State-Zip:	LIVE OAK FL 32064

Title	DIRECTOR
Name	CLARK, JEANNETTE
Address	140001 SR 51
City-State-Zip:	LIVE OAK FL 32060

Title	DIRECTOR
Name	MOOR, CHRISTINE
Address	152 NW SILVERLEAF LANE
City-State-Zip:	LAKE CITY FL 32055

Title	DIRECTOR
Name	ADAMS, CLIFF
Address	6188 SW 78TH DRIVE
City-State-Zip:	JASPER FL 32052

Title	DIRECTOR
Name	ADAMS, JILL
Address	6834 NW 44TH ST
City-State-Zip:	JENNINGS FL 32053

Title	DIRECTOR
Name	GAMBLE, RICKY
Address	12314 BASS ROAD
City-State-Zip:	LIVE OAK FL 32060

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: BEVERLY STANDRIDGE**EXECUTIVE DIRECTOR**

03/18/2020

Electronic Signature of Signing Officer/Director Detail

Date