

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000006331

Entity Name: A-FAMILY'S CHOICE, INC.**Current Principal Place of Business:**16776 NE 2ND AVE
NORTH MIAMI BEACH, FL 33162**Current Mailing Address:**16776 NE 2ND AVE
NORTH MIAMI BEACH, 33162 UN**FEI Number:** 65-0794050**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CANADY, CHARLES
16776 NE 2ND AVE
MIAMI, FL 33162 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
Name	CARBY, TAVIA
Address	16776 NE 2 AVE
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	COO
Name	CANADY, CHARLES DONALD JR.
Address	16776 NE 2 AVE
City-State-Zip:	MIAMI FL 33162

Title	CORRESPONDING SECRETARY
Name	CANADY, CHARLES OLIVIER
Address	16776 NE 2 AVE
City-State-Zip:	MIAMI FL 33162

Title	PD
Name	CANADY, CHARLES
Address	111 NE 170TH ST
City-State-Zip:	NORTH MIAMI BEACH FL 33162

Title	DIRECTOR
Name	CANADY, CHARLES
Address	16776 NE 2ND AVE
City-State-Zip:	MIAMI FL 33162

Title	EXECUTIVE SECRETARY
Name	KAZAN, NATASHA
Address	16776 NE 2ND AVE
City-State-Zip:	MIAMI FL 33162

Title	DIRECTOR
Name	CANADY, CARLENE
Address	16776 NE 2ND AVE
City-State-Zip:	MIAMI FL 33162

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: CHARLES CANADY

VP

04/30/2018

Electronic Signature of Signing Officer/Director Detail_____
Date