

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006758

Entity Name: THE CENTER FOR FAMILY ENRICHMENT, INC.

Current Principal Place of Business:

13921 FAREHAM RD.
ODESSA, FL 33556-1754

Current Mailing Address:

13921 FAREHAM RD.
ODESSA, FL 33556-1754 US

FEI Number: 59-3628864

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MOWREY, THOMAS A MR.
13921 FAREHAM RD.
ODESSA, FL 33556 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: THOMAS A. MOWREY

04/16/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DT
Name ANGELO, GARY W MR.
Address 13921 FAREHAM RD.
City-State-Zip: ODESSA FL 33556-1754

Title DST
Name CALHOON, MARY E MRS.
Address 114 ELM STREET
City-State-Zip: LA VERGNE TN 37086-3783

Title DV, & VP
Name MOWREY, DONNA M MRS.
Address 13921 FAREHAM RD.
City-State-Zip: ODESSA FL 33556-1754

Title P
Name MOWREY, THOMAS A. MR.
Address 13921 FAREHAM RD.
City-State-Zip: ODESSA FL 33556-1754

Title EXECUTIVE SECRETARY
Name MEJIA, DANA M MRS.
Address 13921 FAREHAM RD.
City-State-Zip: ODESSA FL 33556-1754

Title ASST. SECRETARY
Name MOWREY, MARIAH L MISS.
Address 13921 FAREHAM RD.
City-State-Zip: ODESSA FL 33556-1754

Title ASST. SECRETARY
Name MOWREY, CHRISTIN F
Address 13921 FAREHAM RD.
City-State-Zip: ODESSA FL 33556-1754

Title OTHER
Name MOWREY, STEPHEN M
Address 13921 FAREHAM RD.
City-State-Zip: ODESSA FL 33556-1754

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: DONNA MARIA MOWREY

V

04/16/2015

Electronic Signature of Signing Officer/Director Detail

Date