

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000012205

Entity Name: AUTISM PENSACOLA, INC.

Current Principal Place of Business:

10001 N. DAVIS HWY, BLDG 1
PENSACOLA, FL 32514

Current Mailing Address:

10001 N. DAVIS HWY, BLDG 1
PENSACOLA, FL 32514 US

FEI Number: 11-3643957

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCCLELLAN, MARY DONOVAN
5001 GRANDE DRIVE
APT. 1124
PENSACOLA, FL 32504 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: MARY MCCLELLAN

02/14/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXECUTIVE DIRECTOR
Name MCCLELLAN, MARY DONOVAN
Address 10001 N. DAVIS HWY, BLDG 1
City-State-Zip: PENSACOLA FL 32514

Title TREASURER
Name LALAS, EMILY
Address 10001 N. DAVIS HWY, BLDG 1
City-State-Zip: PENSACOLA FL 32514

Title SECRETARY
Name MCGUYRE, CANDY
Address 7391 PINE BLOSSOM RD.
City-State-Zip: MILTON FL 32570

Title PAST CHAIR
Name LEA, KAT
Address 1108 QUIET CREEK ROAD
City-State-Zip: PENSACOLA FL 32514

Title CHAIRMAN
Name EMLING, NORA
Address 1247 E. FISHER STREET
City-State-Zip: PENSACOLA FL 32503

Title VC
Name KENNEDY, EMILY
Address 5815 ADELYN ROAD
City-State-Zip: PENSACOLA FL 32504

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: MARY MCCLELLAN

EXECUTIVE DIRECTOR

02/14/2025

Electronic Signature of Signing Officer/Director Detail

Date