

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748373

**Entity Name:** THE SANCTUARY OF MARIANNA, INC.

**Current Principal Place of Business:**

4070 OLD COTTONDALE RD  
MARIANNA, FL 32448

**Current Mailing Address:**

4070 OLD COTTONDALE RD.  
MARIANNA, FL 32448 US

**FEI Number:** 59-2923479

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BIGGS, ALLEN REV  
1468 HWY. 73 SOUTH  
MARIANNA, FL 32448 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 PC  
Name BIGGS, ALLEN  
Address 1468 HWY 73 SOUTH  
City-State-Zip: MARIANNA FL 32448

Title DIRECTOR  
Name BIGGS, HAROLD D  
Address 1423 HWY 73 SOUTH  
City-State-Zip: MARIANNA FL 32448

Title DIRECTOR  
Name WILLIAMS, MICHAEL A  
Address 5127 MENAWA TRAIL  
City-State-Zip: MARIANNA FL 32446

Title STD  
Name BIGGS, WANDA  
Address 1468 HWY 73 SOUTH  
City-State-Zip: MARIANNA FL 32448

Title DIRECTOR  
Name BIGGS, KATHLEEN  
Address 1423 HWY 73 SOUTH  
City-State-Zip: MARIANNA FL 32448

Title DIRECTOR  
Name HARDY, JAMES  
Address 14235 NW HENRY GRANTHAM RD.  
City-State-Zip: ALTHA FL 32421

Title DIRECTOR  
Name BARNES, HENRY RICHARD  
Address 4398 SOLAR RD.  
City-State-Zip: MARIANNA FL 32448

Title DIRECTOR  
Name SMITH, RANDALL LEON  
Address 4257 LITTON ST.  
City-State-Zip: MARIANNA FL 32446

**Continues on page 2**

*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:** WANDA BIGGS

**SECRETARY**

**04/02/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            BIGGS, JOSHUA ALLEN  
Address        1480 HWY. 73S  
City-State-Zip: MARIANNA FL 32448