2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703348

FILED Mar 30, 2012 Secretary of State

Entity Name: AVON PARK SENIOR ACTIVITIES CENTER, INC.

Current Principal Place of Business: New Principal Place of Business:

109 EAST MAIN ST AVON PARK

AVON PARK, FL 33825 US

Current Mailing Address: New Mailing Address:

109 EAST MAIN ST AVON PARK

AVON PARK, FL 33825 US

FEI Number: 59-6561010 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DAVIS, WALCOTT E

18 N. MARYLAND AVE.
AVON PARK, FL 33825 US

BUSHEE, JOHN
1035 SHAMROCK DR.,.
SEBRING, FL 33875 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: JOHN BUSHEE 03/30/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: ROOD, DON

Address: 10404 HWY, 27, - LOT H-7 City-St-Zip: FROSTPROOF, FL 33843

Title: S

Name: RUSSELL, MARY

Address: 1640 S SCENIC HWY LOT37 City-St-Zip: FROSTPROOF, FL 33843

Title:

 Name:
 POLLOCK, LORRAINE

 Address:
 1640 S SCENIC HWY LOT #1

 City-St-Zip:
 FROSTPROF, FL 33843

Title: VP

Name: DAVIS, RICHARD Address: 605 S. FLORIDA AVE., City-St-Zip: AVON PARK, FL 33825

Title: [

Name: BUSHEE, JOHN
Address: 1035 SHAMROCK DR.
City-St-Zip: SEBRING, FL 33875

Title: [

Name: ELDREDGE, ANNA
Address: 18 N MARYLAND AVE.
City-St-Zip: AVON PARK, FL 33825

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: LORRAINE POLLOCK T 03/30/2012