

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 700308

**Entity Name:** EASTER SEALS FLORIDA, INC.**Current Principal Place of Business:**2010 CROSBY WAY  
WINTER PARK, FL 32792-4119**Current Mailing Address:**2010 CROSBY WAY  
WINTER PARK, FL 32792-4119 US**FEI Number:** 59-0637848**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TAYLOR, CORY L ESQ.  
LAW OFFICE OF CORY TAYLOR , P.A.  
6822 SEMINOLE DRIVE  
ORLANDO, FL 32812 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            PRESIDENT AND CEO  
Name            SUSAN, VENTURA  
Address        10061 CHARDONNAY DRIVE  
City-State-Zip: ORLANDO FL 32832

Title            DIRECTOR  
Name            KNEEN, VICKI  
Address        126 LINDA LANE  
City-State-Zip: PALM BEACH SHORES FL 33404

Title            CFO  
Name            EPPS, GLADYS G  
Address        637 LACOSTA STREET  
City-State-Zip: MINNEOLA FL 34715

Title            DIRECTOR  
Name            TAYLOR, CORY L  
Address        LAW OFFICE OF CORY TAYLOR, P.A.  
6822 SEMINOLE DRIVE  
City-State-Zip: ORLANDO FL 32812

Title            CHAIRMAN  
Name            HANNA, EDWARD R  
Address        FISERV, INC  
600 COLONIAL CENTER PARKWAY  
City-State-Zip: LAKE MARY FL 32746

Title            FIRST VICE CHAIRMAN  
Name            DETURCK, ANDREW  
Address        TRUIST BANK  
3100 FOXRIDGE RD  
City-State-Zip: CHARLOTTE NC 28226

Title            DIRECTOR  
Name            OLETZKY, SHULY  
Address        1203 12TH LANE  
City-State-Zip: PALM BEACH GARDENS FL 33418

Title            COO  
Name            PORCARO, ROB  
Address        1035 S.FEDERAL HWY  
City-State-Zip: DELRAY BEACH FL 33483

**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:** RIKESHA BLAKE

VP OF ACCOUNTING

02/24/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SECOND VICE CHAIRMAN  
Name KERN, JOSEPH ESQ.  
Address 112 KENNISON DR  
City-State-Zip: ORLANDO FL 32801

Title TREASURER  
Name LAMBERT, RONALD L.  
Address 220 SOUTH EDINBURGH DR  
City-State-Zip: WINTER PARK FL 32792

Title SECRETARY  
Name LEWIS, REBECCA  
Address 286 CARAVELLE DRIVE  
City-State-Zip: JUPITER FL 33458

Title PROGRAM LOCATION  
Name AMAR CENTER  
Address 213 S. CONGRESS AVE  
City-State-Zip: WEST PALM BEACH FL 33409-3823

Title PROGRAM LOCATION  
Name PALM BAY FACILITY  
Address 6050 BABCOCK ST., SE, SUITE 18  
City-State-Zip: PALM BAY FL 32909-4204

Title PROGRAM LOCATION  
Name PORT ST. LUCIE OFFICE  
Address 10570 S. FEDERAL HWY, STE 200  
City-State-Zip: PORT ST. LUCIE FL 34952-5606

Title DIRECTOR  
Name CHAPMAN, JENNIFER  
Address 3620 E STERLING CIRCLE  
City-State-Zip: TAMPA FL 33629

Title DIRECTOR  
Name OSBORNE, KAREN E  
Address 10881 SW CANDLEWOOD ROAD  
City-State-Zip: PORT ST LUCIE FL 34987

Title DIRECTOR  
Name HENDERSON, ROBIN  
Address 222 LAKEVIEW AVE, 6TH FLR  
City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR  
Name LAUX, JODI  
Address 300 COLONIAL CENTER PARKWAY  
STE 270  
City-State-Zip: LAKE MARY FL 32746

Title PROGRAM LOCATION  
Name TAMPA MURRAY CENTER  
Address 2401-2403 EAST HENRY AVENUE  
City-State-Zip: TAMPA FL 33610-4434

Title PROGRAM LOCATION  
Name CAMP CHALLENGE  
Address 31600 CAMP CHALLENGE RD.  
City-State-Zip: SORRENTO FL 32776-9558

Title PROGRAM LOCATION  
Name NAPLES OFFICE  
Address 8793 TAMAMI TR., UNIT 111  
City-State-Zip: NAPLES FL 34113-3300

Title PROGRAM LOCATION  
Name ALTRUSA HOUSE  
Address 2002 NW 36TH AVE  
City-State-Zip: GAINESVILLE FL 32605-2493

Title DIRECTOR  
Name LIGHT, ERIC  
Address 301 YAMATO RD  
SUITE 1240  
City-State-Zip: BOCA RATON FL 33431

Title DIRECTOR  
Name WILLIAMS, PAUL  
Address PAUL WILLIAMS INSURANCE AGENCY  
City-State-Zip: MOUNT DORA FL 32757