

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702277

Entity Name: THE ALLIANCE COMMUNITY FOR RETIREMENT LIVING, INC.

Current Principal Place of Business:

600 SOUTH FLORIDA AVENUE
DELAND, FL 32720

Current Mailing Address:

600 SOUTH FLORIDA AVENUE
DELAND, FL 32720

FEI Number: 59-0817603

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON, WILLIAM A
600 S. FLORIDA AVE.
DELAND, FL 32720 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 CHAIRMAN
Name DUSS, DONNA J
Address 15000 SHELL POINT BLVD
City-State-Zip: FORT MYERS FL 33908

Title TREASURER
Name CHRISTMAN, CHANLEY
Address 15000 SHELL POINT BLVD
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR
Name DAVIDSON, JOHN W
Address 15000 SHELL POINT BLVD
City-State-Zip: FORT MYERS FL 33908

Title CEO
Name ANDERSON, WILLIAM A
Address 600 SOUTH FLORIDA AVENUE
City-State-Zip: DELAND FL 32720

Title VC
Name SCHAPPELL, MARTIN
Address 15000 SHELL POINT BLVD
City-State-Zip: FT MYERS FL 33908

Title SECRETARY
Name CASS, PAUL
Address 15000 SHELL POINT BLVD
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR
Name WHITE, ARCHIE
Address 15000 SHELL POINT BLVD
City-State-Zip: FORT MYERS FL 33908

Title CFO, ASST. TREASURER
Name RAINEY, BURKE
Address 15000 SHELL POINT BLVD
City-State-Zip: FT MYERS FL 33908

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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: BURKE RAINEY

**VICE PRESIDENT OF
FINANCE/CFO**

03/13/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DYS, JEREMY ESQ.
Address 15000 SHELL POINT BLVD
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR
Name FLANDERS, TOM REV
Address 15000 SHELL POINT BLVD
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR
Name COOK, NANCY
Address 15000 SHELL POINT BLVD
City-State-Zip: FORT MYERS FL 33908