

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 703348

Entity Name: AVON PARK SENIOR ACTIVITIES CENTER, INC.**Current Principal Place of Business:**109 EAST MAIN ST
AVON PARK
AVON PARK, FL 33825**Current Mailing Address:**109 EAST MAIN ST
AVON PARK
AVON PARK, FL 33825 US**FEI Number:** 83-3383717**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name DOWNIE, CHRISTOPHER J
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

Title VP
Name HOUSTON, TOM
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name ZINDEL, CAROL
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name HUNT, ROBERT
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name BEAN, BONNIE
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name NYLAND, WARREN
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name LEAUGE, KAREN
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name PRITCHETT, HOWARD
Address 109 EAST MAIN ST
City-State-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: CHRISTOPHER J. DOWNIE

PRESIDENT

02/11/2024

Electronic Signature of Signing Officer/Director Detail

Date