

**2022 FLORIDA NOT FOR PROFIT CORPORATION AMENDED 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: No

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 CLAYTON, THOMAS GRANT
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

Title TREASURER
Name MEALY, DARLENE LOUISE
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 LEAGUE, FRANCIS
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

Title SECRETARY
Name SORKO, GARY
Address 109 EAST MAIN ST
 AVON PARK
City-State-Zip: AVON PARK FL 33825

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

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

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

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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: THOMAS G. CLAYTON

PRESIDENT

12/02/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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