## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 706395** 

Entity Name: ADVENT CHRISTIAN VILLAGE, INC.

**Current Principal Place of Business:** 

ADVENT CHRISTIAN VILLAGE 10680 DOWLING PARK DRIVE LIVE OAK, FL 32060

## **Current Mailing Address:**

ADVENT CHRISTIAN VILLAGE P. O. BOX 4307 DOWLING PARK, FL 32064 US

FEI Number: 59-0751905 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KENNON, TODD 582 W DUVAL ST LAKE CITY, FL 32056 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: TODD KENNON 01/25/2023

Electronic Signature of Registered Agent

Date

FILED Jan 25, 2023

**Secretary of State** 

9092044363CC

Officer/Director Detail:

Title PRESIDENT, CEO Title DIRECTOR

Name CARTER, CRAIG Name FENLASON, JOHN

Address 10081 COUNTY ROAD 136 Address 8451 135TH AVENUE SE
City-State-Zip: LIVE OAK FL 32060 City-State-Zip: NEWCASTLE WA 98059

Title DIRECTOR Title VP

Name CHURCHILL, DON Name EDQUID, MARK

Address 1608 W LAUREL GREENS DR Address 10492 WILDWOOD DRIVE

City-State-Zip: ANTHEM AZ 85086 City-State-Zip: LIVE OAK FL 32060

Title SECRETARY, VP Title TREASURER, CFO, VP

Name HILLIARD, KERI Name HETT, STEVEN

Address 10233 229TH LANE Address 22727 104TH STREET

City-State-Zip: LIVE OAK FL 32060 City-State-Zip: LIVE OAK FL 32060

Title DIRECTOR Title DIRECTOR

Name BUSH, KERRY Name CRAFT, CHARLES III

Address 105 WESTPARK DR Address 3109 LANTERN WAY

SUITE 150 City-State-Zip: WILMINGTON NC 28409
City-State-Zip: BRENTWOOD TN 37027

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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: CRAIG CARTER PRESIDENT/CEO 01/25/2023

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name DEAN, DWIGHT Name DARSEY, EDRESS

Address 11 EATON POINT ROAD Address 5170 BLUE YARROW RUN
City-State-Zip: DEER ISLE ME 04627 City-State-Zip: NORCROSS GA 30092-5140

TitleDIRECTORTitleDIRECTORNameLEE, JAMESNamePOOLE, RONNIE

Address 410 MOUNTAIN VIEW ST., SW Address 127 HOWARD STREET, E

City-State-Zip: LENOIR NC 28645-5632 City-State-Zip: LIVE OAK FL 32064

TitleVC, DIRECTORTitleDIRECTORNameROSS, STEVENameSTONE, DAVID KAddress139 SOUTH LAKE AVENUEAddress508 MEADE BLVD

City-State-Zip: ALBANY NY 12208 City-State-Zip: NORTH AURORA IL 60542-2039

Title ASST. SECRETARY Title CHAIRMAN, DIRECTOR
Name CRAWFORD, MARY B Name CHAMBERS, ROLLY

Address 11504 COUNTY ROAD 252 Address 5053 SHARON WOODS LN

City-State-Zip: MCALPIN FL 32062 City-State-Zip: CHARLOTTE NC 28210-4853

Title DIRECTOR Title DIRECTOR

Name THOMAS, RON Name WHITE, CHERYL

Address 90 OFFSHORE DR

Address 10926 S HAMPTON DR Address 90 OFFSHORE DR

City-State-Zip: CHARLOTTE NC 28227-5442 City-State-Zip: MURRELLS INLET SC 29576

Title DIRECTOR Title DIRECTOR

NameFORD, ROBERTNameLAWRENCE, ARTHURAddress8896 135TH LOOPAddress10254 WILDWOOD CIRCLE

City-State-Zip: LIVE OAK FL 32060