

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712026

**Entity Name:** WORLD AFFAIRS COUNCIL OF CENTRAL FLORIDA, INC

**FILED**  
**Feb 18, 2019**  
**Secretary of State**  
**1692942921CC**

**Current Principal Place of Business:**

420 S. ORANGE AVE  
SUITE 500  
ORLANDO, FL 32801

**Current Mailing Address:**

420 S. ORANGE AVE  
SUITE 500  
ORLANDO, FL 32801

**FEI Number: 59-1837575**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CHASTANG, LAWRENCE J  
420 S. ORANGE AVE  
SUITE 500  
ORLANDO, FL 32801 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            TURK, ROBERT  
Address        300 N. PARK AVE.  
City-State-Zip: SANFORD FL 32772

Title            SECRETARY  
Name            FLORES, CYNTHIA  
Address        390 NORTH ORANGE AVE, 9TH  
                  FLOOR  
City-State-Zip: ORLANDO FL 32801

Title            CHAIR EMERITUS  
Name            CHASTANG, LAWRENCE  
Address        420 S. ORANGE AVE  
City-State-Zip: ORLANDO FL 32801

Title            CHAIRMAN  
Name            BERSIA, JOHN  
Address        UNIVERSITY OF CENTRAL FLORIDA,  
                  HOWARD PHILLIPS HALL 202  
                  4000 CENTRAL FLORIDA BLVD.  
City-State-Zip: ORLANDO FL 32816

Title            EXECUTIVE DIRECTOR  
Name            RIDLEY-GAL, SARAH  
Address        12424 RESEARCH PARKWAY, SUITE  
                  220A  
City-State-Zip: ORLANDO FL 32826

Title            VC, TREASURER  
Name            AMBINDER, PATRICIA  
Address        240 TRISMEN TER  
City-State-Zip: WINTER PARK FL 32789

Title            BOARD MEMBER  
Name            GRABAUSKAS, CAROL  
Address        3447 FORSYTHE TERRACE  
City-State-Zip: THE VILLAGES FL 32162

*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: SARAH RIDLEY-GAL**

**EXECUTIVE  
DIRECTOR/BOARD  
MEMBER**

**02/18/2019**

