

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 732240

**FILED**  
**Feb 01, 2022**  
**Secretary of State**  
**8746486844CC**

**Entity Name:** FLORIDA COLLEGE SYSTEM ACTIVITIES ASSOCIATION  
INCORPORATED

**Current Principal Place of Business:**

1725 MAHAN DRIVE  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

1725 MAHAN DRIVE  
TALLAHASSEE, FL 32308 US

**FEI Number:** 59-6193023

**Certificate of Status Desired:** No

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

WARREN, KELLY N  
1725 MAHAN DRIVE  
TALLAHASSEE, FL 32308 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:** KELLY N WARREN

02/01/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BARRETT, LAWRENCE DR.  
Address 149 SOUTHEAST VOCATIONAL PLACE  
City-State-Zip: LAKE CITY FL 32025

Title DIRECTOR  
Name MURDAUGH, JAMES DR.  
Address 444 APPELYARD DR.  
City-State-Zip: TALLAHASSEE FL 32304

Title DIRECTOR  
Name LORENZ, GEORGIA DR.  
Address 100 WELDON WAY  
City-State-Zip: SANFORD FL 32773

Title DIRECTOR  
Name CLEMMENS, SARAH DR.  
Address 3094 INDIAN CIRCLE  
City-State-Zip: MARIANNA FL 32446

Title DIRECTOR  
Name PARKER, AVA DR.  
Address 4200 CONGRESS AVE.  
City-State-Zip: LAKE WORTH FL 33461

Title EXECUTIVE DIRECTOR  
Name WARREN, KELLY N  
Address 1725 MAHAN DRIVE  
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR  
Name HAILE, GREG  
Address 111 E. OLAS BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33301

Title DIRECTOR  
Name HENNINGSSEN, JIM DR.  
Address 3001 SW COLLEGE RD.  
City-State-Zip: OCALA FL 34474

**Continues on page 2**

*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:** KELLY WARREN

EXECUTIVE DIRECTOR

02/01/2022

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name LOBASSO, THOMAS DR.  
Address P. O. BOX 2811  
City-State-Zip: DAYTONA BEACH FL 32120

Title DIRECTOR  
Name ALLBRITTEN, JEFF DR.  
Address 8099 COLLEGE PARKWAY  
City-State-Zip: FT. MYERS FL 33919

Title DIRECTOR  
Name GUEVERRA, JONATHAN DR.  
Address 5901 COLLEGE ROAD  
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR  
Name HOLDNAK, JOHN DR.  
Address 5230 W. HIGHWAY 98  
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR  
Name SIDOR, STANLEY DR.  
Address 9501 U. S. HIGHWAY 441  
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR  
Name DEVIN, STEPHENSON DR.  
Address 100 COLLEGE BLVD.  
City-State-Zip: NICEVILLE FL 32578

Title DIRECTOR  
Name MEADOWS, ED DR.  
Address 1000 COLLEGE BLVD  
City-State-Zip: PENSACOLA FL 32504

Title DIRECTOR  
Name BROADIE II, PAUL DR.  
Address 3000 NW 83RD STREET  
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR  
Name PROBSTFELD, CAROL DR.  
Address P. O. BOX 1849  
City-State-Zip: BRADENTON FL 34206

Title DIRECTOR  
Name PICKENS, JOE ESQ.  
Address 5001 ST. JOHNS AVENUE  
City-State-Zip: PALATKA FL 32177

Title PRESIDENT  
Name LAVENDER, MELISSA DR.

Title DIRECTOR  
Name RICHEY, JAMES DR.  
Address 1519 CLEARLAKE ROAD  
City-State-Zip: COCOA FL 32922

Title DIRECTOR  
Name AVENDANO, JOHN  
Address 501 W. STATE STREET  
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR  
Name ATWATER, KENNETH DR.  
Address P. O. BOX 31127  
City-State-Zip: TAMPA FL 33631

Title DIRECTOR  
Name MOORE, TIMOTHY DR.  
Address 3209 VIRGINIA AVENUE  
City-State-Zip: FT. PIERCE FL 34981

Title DIRECTOR  
Name PUMARIEGA, MADELINE  
Address 300 NE 2ND AVENUE  
City-State-Zip: MIAMI FL 33132

Title DIRECTOR  
Name BEARD, TIM DR.  
Address 10230 RIDGE ROAD  
City-State-Zip: NEW PORT RICHEY FL 34654

Title DIRECTOR  
Name FALCONETTI, ANGELA DR.  
Address 999 AVENUE H, NE  
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR  
Name LEITZEL, THOMAS DR.  
Address 600 W. COLLEGE DRIVE  
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR  
Name WILLIAMS, TONJUA DR.  
Address P. O. BOX 13489  
City-State-Zip: ST. PETERSBURG FL 33733

Title DIRECTOR  
Name SHUGART, SANFORD DR.  
Address P.O. BOX 3028  
City-State-Zip: ORLANDO FL 32802

Address GULF COAST STATE COLLEGE  
5230 W. HIGHWAY 98

City-State-Zip: PANAMA CITY FL 32401