2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734502

Entity Name: SPINA BIFIDA ASSOCIATION OF CENTRAL FLORIDA, INC.

FILED Mar 19, 2020 Secretary of State 9770097551CC

Current Principal Place of Business:

100 WEST LUCERNE CIRCLE

SUITE 100-G

ORLANDO, FL 32801

Current Mailing Address:

100 WEST LUCERNE CIRCLE SUITE 100-G

ORLANDO, FL 32801 US

FEI Number: 59-1804997 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERVEY, SHANI-ANGELA 100 WEST LUCERNE CIRCLE SUITE 100-G 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: SHANI-ANGELA HERVEY 03/19/2020

> Date Electronic Signature of Registered Agent

> > Title

Title

Officer/Director Detail:

Title PAST BOARD CHAIR Title DIRECTOR

Name ANDERSON, MARK Name BONHAM, J. CAREY

4251 VIRGINIA DRIVE 4472 CLEARWATER HARBOR DRIVE Address Address

SOUTH City-State-Zip: ORLANDO FL 32814

City-State-Zip: LARGO FL 33770

Title **DIRECTOR**

City-State-Zip:

City-State-Zip:

BEVANS, SHANNON Name Name HERVEY, SHANI-ANGELA

100 WEST LUCERNE CIRCLE Address Address 100 WEST LUCERNE CIRCLE

SUITE 100-G SUITE 100-G

ORLANDO FL 32801 City-State-Zip: ORLANDO FL 32801

Title **SECRETARY**

Name CARDONA, DAVID GRAHAM, SAMANTHA Name

24638 STATE ROAD 54 Address 100 WEST LUCERNE CIRCLE Address

LUTZ FL 33559 SUITE 100-G City-State-Zip:

City-State-Zip: ORLANDO FL 32801

Title **DIRECTOR**

VACCA, ANDREW Title DIRECTOR Name

Name CARDARELLI . LARRY 100 WEST LUCERNE CIRCLE Address

SUITE 100-G Address 100 WEST LUCERNE CIRCLE

> ORLANDO FL 32801 SUITE 100-G

> > ORLANDO FL 32801 City-State-Zip:

EXECUTIVE DIRECTOR

CHAIRMAN

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: SHANI-ANGELA HERVEY EXECUTIVE DIRECTOR 03/19/2020