

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 739351

**Entity Name:** LIBERTY COUNTY SENIOR CITIZENS ASSOCIATION, INC.

**Current Principal Place of Business:**

15629 NW CR 12  
BRISTOL, FL 32321

**FILED**  
**Feb 12, 2024**  
**Secretary of State**  
**8607741992CC**

**Current Mailing Address:**

PO BOX 730  
BRISTOL, FL 32321

**FEI Number: 59-1769552**

**Certificate of Status Desired: No**

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

SUMNER, RUDY  
HWY 65 S BOX 72  
TELOGIA, FL 32360 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 VP  
Name PHILLIPS, BRETT  
Address 6840 NW TORREYA PARK RD.  
City-State-Zip: BRISTOL FL 32321

Title P  
Name SUMNER, RUDY  
Address HWY 65 S PO BOX 72  
City-State-Zip: TELOGIA FL 32360

Title D  
Name SHIVER, PEGGY  
Address 2637 NW SR 270  
City-State-Zip: BRISTOL FL 32321

Title SECRETARY  
Name FORD, STEPHEN  
Address 11472 NW FORD FARM TRAIL  
City-State-Zip: BRISTOL FL 32321

Title DIRECTOR  
Name MONEY, WALTER  
Address 19061 NW ST RD 12  
P. O. BOX  
City-State-Zip: BRISTOL FL 32321

Title DIRECTOR  
Name SHEPARD, DEBBIE  
Address 12729 NW TWIN OAKS DRIVE  
City-State-Zip: BRISTOL FL 32321

Title DIRECTOR  
Name FLETCHER, CURTIS  
Address 17163 NE CR 67-A  
City-State-Zip: HOSFORD FL 32334

Title DIRECTOR  
Name SAINT, PATSY  
Address 5251 NW SR 270  
City-State-Zip: BRISTOL FL 32321

**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: RUDY SUMNER**

**BOARD PRESIDENT**

**02/12/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name SELLERS, CAROLYN  
Address 12974 NW SELLERS RD  
City-State-Zip: BRISTOL FL 32321

Title DIRECTOR  
Name MINCHEW, DON  
Address 161 DOGWOOD AVE.  
City-State-Zip: WEWAHITCHKA FL 32465

Title DIRECTOR  
Name MINCHEW, ANGIE  
Address 161 DOGWOOD AVE.  
City-State-Zip: WEWAHITCHKA FL 32465