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: MARY MARSILLETT

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# 743078	
Entity Name: TWIN FOUNTAINS CLUB, INC.	

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# **Current Principal Place of Business:**

6400 TWIN FOUNTAINS DRIVE LAKE WALES, FL 33898

### **Current Mailing Address:**

6400 TWIN FOUNTAINS DRIVE LAKE WALES, FL 33898 US

### FEI Number: 59-2933376

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

SOUTH MILHAUSEN PA GATEWAY CENTER 1000 LEGION PLACE 1200 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:	JOHN CHRISTENSEN			01/12/2024				
	Electronic Signature of Registered Agent			Date				
Officer/Direc	Officer/Director Detail :							
Title	PRESIDENT	Title	VICE-PRESIDENT					
Name	MARSILLETT, MARY	Name	TANKE, BEVERLY					
Address	6302 TREASURE VALLEY LOOP	Address	6334 TREASURE VALLEY LOOP	)				
City-State-Zip:	LAKE WALES FL 33898	City-State-Zip:	LAKE WALES FL 33898					
Title	DIRECTOR	Title	DIRECTOR					
Name	CALI, DAVID	Name	THOMAS, CLARENCE					
Address	6357 TREASURE VALLEY LOOP	Address	121 CANDLEWOOD DRIVE					
City-State-Zip:	LAKE WALES FL 33898	City-State-Zip:	LAKE WALES FL 33898					
Title	DIRECTOR							
Name	KETT, GREG							
Address	154 EDGEWOOD BOULEVARD							
City-State-Zip:	LAKE WALES FL 33898							

PRESIDENT

01/12/2024

## FILED Jan 12, 2024 Secretary of State 5065876423CC

Certificate of Status Desired: Yes

Date