

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 744396

**Entity Name:** FLORIDA LOCAL GOVERNMENT INFORMATION SYSTEMS ASSOCIATION, INC.

**FILED**  
**Jan 15, 2020**  
**Secretary of State**  
**4200595406CC**

**Current Principal Place of Business:**

301 S. BRONOUGH STREET  
STE 300  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

P.O. BOX 1757  
TALLAHASSEE, FL 32302-1757

**FEI Number: 59-1894353**

**Certificate of Status Desired: No**

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

FLORIDA LEAGUE OF CITIES  
125 E COLONIAL DRIVE  
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 PAST PRESIDENT  
Name TONI, BLEIWEISS  
Address PO BOX 9384  
City-State-Zip: FORT MYERS FL 33902

Title TREASURER  
Name STEVENS, SANDRA  
Address 201 W PALMETTO PARK RD  
City-State-Zip: BOCA RATON FL 33432

Title PRESIDENT  
Name DESJARDINS, RAY  
Address 18500 MURDOCK CIRCLE  
City-State-Zip: PORT CHARLOTTE FL 33948

Title SECRETARY  
Name LANKE, KAREN  
Address 19200 WEST COUNTRY CLUB DRIVE  
City-State-Zip: AVENTURA FL 33180

Title VP  
Name NOWLIN, KEITH  
Address 201 S ROSALIND AVE  
City-State-Zip: ORLANDO FL 32801

Title EXECUTIVE DIRECTOR  
Name VAN ZWIETEN, MICHAEL  
Address 125 EAST COLONIAL DRIVE  
City-State-Zip: ORLANDO FL 32801

*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: MICHAEL VAN ZWIETEN**

**EXECUTIVE DIRECTOR**

**01/15/2020**

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

\_\_\_\_\_  
Date