2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2013
Secretary of State
CC7567427946

DOCUMENT# 756143

Entity Name: WEST CENTRAL FLORIDA AREA AGENCY ON AGING, INC.

Current Principal Place of Business:

5905 BRECKENRIDGE PKWY
SUITE F
TAMPA, FL 33610

Current Mailing Address:

5905 BRECKENRIDGE PKWY
SUITE F
TAMPA, FL 33610 US

FEI Number: 59-2074063

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BAKAS JOHN W. JR.
10150 HIGHLAND MANOR DRIVE - SUITE 200
TAMPA, FL 33610-9712 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	CHMN	Title	TRES
Name	SCHONFELD, LAWRENCE	Name	DARBY, BEN
Address	13301 BRUCE B DOWNS BLVD	Address	PO BOX 2971
City-State-Zip:	TAMPA FL 33612	City-State-Zip:	LAKELAND FL 33806
Title	VCHM	Title	SEC
Name	HERRINGTON, BARBARA	Name	ROSENBAUM, SARA
Address	2801 COUNTRY CLUB NORTH	Address	235 BRIGHTON RD
City-State-Zip:	WINTER HAVEN FL 33881	City-State-Zip:	SEBRING FL 33870
Title	CEO		
Name	KELLY, MAUREEN		
Address	5905 BRECKENRIDGE PKWY		
City-State-Zip:	TAMPA FL 33610		

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: MAUREEN KELLY CEO 04/25/2013

Electronic Signature of Signing Officer/Director Detail — Date