

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767181

Entity Name: FRIENDS ACROSS THE AGES, INC.

Current Principal Place of Business:

4131 NW 28TH LANE
SUITE 7-E
GAINESVILLE, FL 32606

Current Mailing Address:

P.O. BOX 14698
GAINESVILLE, FL 32604

FEI Number: 59-2410787

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLAY, STEVEN P
2445 NW 13TH PLACE
GAINESVILLE, FL 32605 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 PD
Name HAMILTON, GEORGE
Address 3715 SW 2ND PL
City-State-Zip: GAINESVILLE FL 32607

Title SD
Name MITCHELL, KIM
Address 505 NE 6TH AVE
City-State-Zip: GAINESVILLE FL 32601

Title VD
Name HOBBS, JOHN
Address 4628 NW 39 TERRACE
City-State-Zip: GAINESVILLE FL 32606

Title TD
Name BLAY, STEVEN P
Address 2445 NW 13TH PLACE
City-State-Zip: GAINESVILLE FL 32605

Title D
Name BLAY, ALLISON C
Address 2445 NW 13TH PLACE
City-State-Zip: GAINESVILLE FL 32605

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: STEVEN P BLAY

TREASURER

04/18/2025

Electronic Signature of Signing Officer/Director Detail

Date