2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004260

Entity Name: FLORIDA K OF C CHARITIES, INC.

Current Principal Place of Business:

1406 S.W. 159TH AVENUE PEMBROKE PINES. FL 33027

Current Mailing Address:

1406 S.W. 159TH AVENUE

PEMBROKE PINES. FL 33027 US

FEI Number: 59-3659193 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'CONNOR, SCOTT A 1406 S.W. 159TH AVENUE PEMBROKE PINES, FL 33027 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

FILED Jan 24, 2020

Secretary of State

7054303770CC

Officer/Director Detail :

Title **PRESIDENT** Title **SECRETARY**

O'CONNOR, SCOTT A Name Name URRUTIA, ROBERT S.

1406 S.W. 159TH AVENUE 339 WHISPER RIDGE LOOP Address Address

City-State-Zip: DAVENPORT FL 33897 PEMBROKE PINES FL 33027 City-State-Zip:

Title VP, DIRECTOR Title **TREASURER**

Name RING, STEPHEN A. Name HUGHES, RICHARD P.

Address 8298 SPICEBUSH TERRACE Address 5118 SYLVAN OAKS DRIVE

PORT ST. LUCIE FL 34952-2625 City-State-Zip: City-State-Zip: VALRICO FL 33596

Title DIRECTOR Title **DIRECTOR**

Name GIZEWSKI, MICHAEL P RASCH, ROBERT W Name Address 9292 PINEVILLE DR. 1188 BUTTONWOOD CIRCLE Address

City-State-Zip: LAKE WORTH FL 33467 ALTAMONTE SPRINGS FL 32714-City-State-Zip:

Title DIRECTOR

KAHRER, DONALD T. JR. Name 829 GROVESMERE LOOP Address City-State-Zip: OCOEE FL 34761-5624

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.

01/24/2020 SIGNATURE: ROBERT S. URRUTIA **SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date