

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001745

Entity Name: CENTRAL FLORIDA YMCA CHILDCARE SERVICES, INC.**Current Principal Place of Business:**433 NORTH MILLS AVENUE
ORLANDO, FL 32803**Current Mailing Address:**433 NORTH MILLS AVENUE
ORLANDO, FL 32803 US**FEI Number:** 20-1065407**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MANAHAN, COLLEEN K.
433 NORTH MILLS AVENUE
ORLANDO, FL 32803 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:** COLLEEN K. MANAHAN

01/20/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO
Name WILCOX, DANIEL
Address 433 NORTH MILLS AVENUE
City-State-Zip: ORLANDO FL 32803

Title SECRETARY
Name MARTINEZ, RALPH
Address 433 NORTH MILLS AVENUE
City-State-Zip: ORLANDO FL 32803

Title TREASURER
Name MANUEL, MICHAEL
Address 433 NORTH MILLS AVENUE
City-State-Zip: ORLANDO FL 32803

Title CFO
Name MANAHAN, COLLEEN
Address 433 NORTH MILLS AVENUE
City-State-Zip: ORLANDO FL 32803

Title CHAIRMAN
Name KRZYZAK, PETE
Address 433 NORTH MILLS AVENUE
City-State-Zip: ORLANDO FL 32803

Title COO
Name ALEXANDER, JODY
Address 433 NORTH MILLS AVENUE
City-State-Zip: ORLANDO FL 32803

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: COLLEEN K. MANAHAN

CFO

01/20/2021

Electronic Signature of Signing Officer/Director Detail

Date