# 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006974

Entity Name: PARKINSON ASSOCIATION OF GREATER DAYTONA BEACH,

INC.

FILED
Jan 14, 2015
Secretary of State
CC8196285568

# **Current Principal Place of Business:**

555 W. GRANADA BLVD.

STE. A-1

ORMOND BEACH, FL 32174

# **Current Mailing Address:**

P. O. BOX 4193

ORMOND BEACH, FL 32175

FEI Number: 20-0678283 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

SCHECTER, RANDAL L 175 W GRANADA BLVD, STE. 201 ORMOND BEACH, FL 32174 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	P	Title	S

Name VINCE, KINSLER Name DAWSON, NANCY

Address 555 W. GRANADA DR STE. A-1 Address 55 KNOLLWOOD ESTATES DR City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip: ORMOND BEACH FL 32174

Title T Title MEMB

NameSIPES, KENNameLAUTURNER, ELLENAddress355 APPLEGATE LNDGAddress134 RIVER BLUFF DR

City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip: ORMOND BEACH FL 32174

Title DIRECTOR Title DIRECTOR

NamePOPIELARSKI, BRUCENameESTES, SHARONAddress315 N 12TH STAddress56 KENT DR

City-State-Zip: FLAGLER BEACH FL 32136 City-State-Zip: ORMOND BEACH FL 32176

Т

SIGNATURE: KEN SIPES

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.