

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03874

Entity Name: TRI-COUNTY UNITARIAN UNIVERSALISTS, FLORIDA, INC.

Current Principal Place of Business:

7280 SE 135TH STREET
SUMMERFIELD, FL 34491

Current Mailing Address:

P.O. BOX 829
SUMMERFIELD, FL 34492 US

FEI Number: 59-2319450

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BISHOP, JACK JR.
2100 HESTIA LOOP
APT 312
OVIEDO, FL 32765 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: JACK BISHOP JR

03/30/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GROSSMAN, CINDY
Address 637 SHEPPARD WAY
City-State-Zip: THE VILLAGES FL 32162

Title VP
Name WESTMORELAND, LYNNE
Address 2800 W. CYPRESS DRIVE
City-State-Zip: DUNNELLON FL 34433

Title SECRETARY
Name LEWIS, MARY GRETCHEN
Address 2079 THORTON TERRACE
City-State-Zip: THE VILLAGES FL 32162

Title TREASURER
Name BISHOP, JACK JR.
Address 2100 HESTIA LOOP
 APT 312
City-State-Zip: OVIEDO FL 32765

Title TRUSTEE
Name GAMMONS, KAREN
Address 3744 WATERLILY AVE
City-State-Zip: THE VILLAGES FL 32163

Title TRUSTEE
Name TWISS, BRUCE
Address 8708 SW 95TH LANE
 UNIT #B
City-State-Zip: OCALA FL 34481

Title TRUSTEE
Name NEWSTEIN, GAIL
Address 13818 SE 93RD CIRCLE
City-State-Zip: SUMMERFIELD FL 34491

Title REVERAND
Name SNAVELY, CYNTHIA
Address 797 TEAGUE TRAIL
 #2208
City-State-Zip: LADY LAKE FL 32159

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: JACK BISHOP JR.

TREASURER

03/30/2023

Electronic Signature of Signing Officer/Director Detail

Date