

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04792

Entity Name: CARON OF FLORIDA, INC.**Current Principal Place of Business:**7789 NW BEACON SQUARE BLVD
#101
BOCA RATON, FL 33487**Current Mailing Address:**PO BOX 150
WERNERSVILLE, PA 19565 US**FEI Number:** 59-2500657**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**TIEMAN, DOUGLAS
7789 NW BEACON SQUARE BLVD
BOCA RATON, FL 33487 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 DIRECTOR
Name MCGLINN, MICHAEL J.
Address 850 N. WYOMISSING BOULEVARD
City-State-Zip: WYOMISSING PA 19610

Title PRESIDENT
Name TIEMAN, DOUGLAS
Address P.O. BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name ZINTAK III, BENJAMIN
Address 1104 THRUSH ROAD
City-State-Zip: WYOMISSING PA 19610

Title TREASURER
Name PARFITT, WILLIAM
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title SECRETARY
Name SAVARESE, JENNIFER
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title CHAIRMAN
Name WALL, STEVEN R ESQ.
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name ARROW, ALLEN H ESQ.
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name CALICCHIO, DENISE LEFRAK
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

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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: DOUGLAS TIEMAN

CEO

06/13/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DEALY, EDWIN M
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name EANET, BRUCE
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name FLYNN, THOMAS DR.
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name FITZSIMONS, JOHN P
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name HELM, ANGEL
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name MOFFATT, J CURTIS ESQ.
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name THORNTON, WILLIAM P JR.
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name HUYETT, DAN
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name DENBY, LINDA CARON
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name ESSER, STEPHEN J
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name FITZSIMONS, BETH
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name GREENE, COLLEEN
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name KANE, STEPHEN J
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name SKIBBIE, MARK
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name WILLIAMS, THOMAS
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565

Title DIRECTOR
Name MAGUIRE, CHRIS
Address PO BOX 150
City-State-Zip: WERNERSVILLE PA 19565