

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008258

Entity Name: INDEPENDENT BENEFITS COUNCIL, INC.**Current Principal Place of Business:**213 SOUTH ADAMS STREET
TALLAHASSEE, FL 32301**Current Mailing Address:**213 SOUTH ADAMS STREET
TALLAHASSEE, FL 32301**FEI Number:** 26-0763173**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GAURONSKAS, CAROLE MARIE
213 SOUTH ADAMS STREET
TALLAHASSEE, FL 32301 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:** CAROLE MARIE GAURONSKAS

02/20/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DVC
Name MONTFORD, WILLIAM
Address 208 SO. MONROE STREET
City-State-Zip: TALLAHASSEE FL 32301

Title DIRECTOR
Name MESSINA, ANDREA
Address 203 S. MONROE STREET
City-State-Zip: TALLAHASSEE FL 32301

Title D, CHAIRMAN
Name MIXON, JUHAN
Address 206 S. MONROE STREET
SUITE B
City-State-Zip: TALLAHASSEE FL 32301

Title SECRETARY, TREASURER,
DIRECTOR
Name GAURONSKAS, CAROLE MARIE
Address 213 SOUTH ADAMS STREET
City-State-Zip: TALLAHASSEE FL 32301

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: CAROLE M. GAURONSKAS**SECRETARY-TREASURER** 02/20/2020

Electronic Signature of Signing Officer/Director Detail

Date