

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000012270

**Entity Name:** ESTATE PLANNING COUNCIL OF THE FUN COAST, INC.

**Current Principal Place of Business:**

24 FENMORE LANE  
PALM COAST, FL 32137

**Current Mailing Address:**

PO BOX 354488  
PALM COAST, FL 32135

**FEI Number:** 20-8654008

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GORNT0, BRADFORD B  
444 SEABREEZE BOULEVARD  
SUITE 200  
DAYTONA BEACH, FL 32118 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 D  
Name VAN DEUSEN, W. BRUCE M  
Address 444 SEABREEZE BOULVEARD, SUITE 200  
City-State-Zip: DAYTONA BEACH FL 32118

Title PD  
Name GORNT0, BRADFORD B  
Address 444 SEABREEZE BOULEVARD, SUITE 200  
City-State-Zip: DAYTONA BEACH FL 32118

Title VPD  
Name GEPPNER, EDWARD  
Address 10 FLORIDA PARK DRIVE, N  
City-State-Zip: PALM COAST FL 32137

Title SD  
Name EDDY, JANE S  
Address 533 N NOVA ROAD  
City-State-Zip: ORMOND BEACH FL 32174

Title TD  
Name SCHROEDER, ROBERT  
Address 50 LEANNI WAY  
City-State-Zip: PALM COAST FL 32137

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: ROBERT SCHROEDER**

**TD**

**04/22/2015**

Electronic Signature of Signing Officer/Director Detail

Date