

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000010377

Entity Name: FLORIDA PACE PROVIDERS ASSOCIATION, INC.

Current Principal Place of Business:

9470 HEALTHPARK CIRCLE
FORT MYERS, FL 33908

Current Mailing Address:

9470 HEALTHPARK CIRCLE
FORT MYERS, FL 33908

FEI Number: 27-4125501

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HUDSON, MATT
9470 HEALTHPARK CIRCLE
FORT MYERS, FL 33908 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: MATT HUDSON

04/02/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, PRESIDENT
Name BECKWITH, SAMIRA K.
Address 9470 HEALTHPARK CIRCLE
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR, TREASURER
Name HUDSON, MATTHEW
Address 9470 HEALTHPARK CIRCLE
City-State-Zip: FORT MYERS FL 33908

Title DIRECTOR, SECRETARY
Name REITER, THOMAS
Address 5771 ROOSEVELT BLVD
BLDG 610
City-State-Zip: CLEARWATER FL 33760

Title DIRECTOR, VP
Name SADOWSKY, ALAN
Address 4847 FRED GLADSTONE DR
City-State-Zip: WEST PALM BEACH FL 33417

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: MATTHEW HUDSON

DIRECTOR, TREASURER 04/02/2024

Electronic Signature of Signing Officer/Director Detail

Date