		Certificate of Status Desired. N	0	
Name and Address of Current Registered Agent:				
SMITH, ART 610 CENTRAL AVENUE SW JASPER, FL 32052 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	ART SMITH		04/26/	2024
	Electronic Signature of Registered Agent		Da	te
Officer/Director Detail :				
Title	D	Title	D	
Name	SMITH, ART	Name	SALGUERIO, JESUS R	
Address	207 S.E. 8TH STREET	Address	4747 SOUTH KENWOOD AVE., #1A	
City-State-Zip:	JASPER FL 32052	City-State-Zip:	CHICAGO IL 60615	
Title	D			
Name	LEVIN, SUSAN			
Address	2821 CLINE STREET			
City-State-Zip:	TALLAHASSEE FL 32308			

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: ART SMITH

Electronic Signature of Signing Officer/Director Detail

Entity Name: THE REUNION CENTER, INC.

DOCUMENT# N1400000682

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

610 CENTRAL SW JASPER, FL 32052

Current Mailing Address:

610 CENTRAL AVENUE 1A JASPER, FL 32052 US

FEI Number: 46-4795860

Ν

Certificate of Status Desired: No

PRESIDENT

04/26/2024

Date