

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000006025

FILED
Jan 29, 2021
Secretary of State
5339730294CC

Entity Name: FLORIDA DESTINATION IMAGINATION, INC

Current Principal Place of Business:

1702 HUNTINGTON PATH
THE VILLAGES, FL 32162

Current Mailing Address:

1702 HUNTINGTON PATH
THE VILLAGES, FL 32162 US

FEI Number: 81-2950801

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOWLER, ERICA R
1702 HUNTINGTON PATH
THE VILLAGES, FL 32162 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 AD
Name BOWLER, ERICA R
Address 1702 HUNTINGTON PATH
City-State-Zip: THE VILLAGES FL 32162

Title TRES
Name PLANDER, KRISTEN
Address 8807 TOTTENHAM WAY
City-State-Zip: KISSIMMEE FL 34747

Title MEMB
Name PLANDER, DOUGLAS
Address 8807 TOTTENHAM WAY
City-State-Zip: KISSIMMEE FL 34747

Title MEMB
Name BOWLER, CHARLES L
Address 1702 HUNTINGTON PATH
City-State-Zip: THE VILLAGES FL 32162

Title MEMB
Name MOON, CINDY
Address 1450 S. ORLANDO AVE.
City-State-Zip: MAITLAND FL 32751

Title MEMB
Name HOLT, JULIE
Address 14537 GATEWAY POINTE CIR
APT 10310
City-State-Zip: ORLANDO FL 32821

Title SECRETARY
Name HERLIHY, TIMOTHY
Address 8517 MILANO DR
APT 1930
City-State-Zip: ORLANDO FL 32810

Title MEMB
Name CLAUSEN, LAURA
Address 7050 VILLA ESTELLE DR.
City-State-Zip: ORLANDO FL 32819

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: CHARLES BOWLER

BOARD MEMBER

01/29/2021

Electronic Signature of Signing Officer/Director Detail

Date