

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000011463

**Entity Name:** THRIVE LGBT INC

**Current Principal Place of Business:**

1211 CLUBSIDE DR.  
LONGWOOD, , FL 32779

**Current Mailing Address:**

1211 CLUBSIDE DR.  
LONGWOOD, , FL 32779 US

**FEI Number:** 82-3438133

**Certificate of Status Desired:** No

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

VILLAGE TAX SERVICES LLC  
1540 INTERNATIONAL PARKWAY STE 2000  
LAKE MARY, FL 32757 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            DIR  
Name            RICHARD RANDALL THOMAS II  
Address        1211 CLUBSIDE DR.  
City-State-Zip: LONGWOOD, FL 32779

Title            DIR  
Name            STEED, TERRI  
Address        5126 FAYANN STREET  
City-State-Zip: ORLANDO FL 32806

Title            DIR  
Name            KARSLAKE, DANIEL  
Address        WINTERFEDLTSTRASSE 31  
City-State-Zip: BERLIN, GERMAN 10781

Title            DIR  
Name            PARESI, JAMES  
Address        1901 NEWPORT BLVD SUITE 350  
City-State-Zip: COSTA MESA CA 92627

Title            DIR  
Name            GILL, LOREN  
Address        805 ESCAMBIA DR  
City-State-Zip: SANFORD FL 32771

*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:** LOREN GILL

**DIRECTOR**

**04/06/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date