

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000007045

Entity Name: FLORIDA-WAKAYAMA CULTURAL ASSOCIATION, INC.

Current Principal Place of Business:

C/O THE CENTER FOR ASIAN STUDIES
BUILDING 71,ROOM 148 11000 UNIVERSITY PKWY
PENSACOLA, FL 32514

Current Mailing Address:

C/O THE CENTER FOR ASIAN STUDIES
BUILDING 71,ROOM 148 11000 UNIVERSITY PKWY
PENSACOLA, FL 32514

FEI Number: 86-3078643

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOWMAN JR., WILLIAM R ESQ
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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 CHAIRMAN
Name MARX, MORRIS DR
Address 114 MARSH CREEK ROAD
City-State-Zip: FERNANDINA BEACH FL 32034-6421

Title PRESIDENT
Name PHILLIPS, GAYLEN DR
Address 1676 SILVERWOOD DRIVE
City-State-Zip: TALLAHASSEE FL 32301

Title VP
Name HONDA, SHIGEKO
Address 1259 BAYVIEW LANE
City-State-Zip: GULF BREEZE FL 32563

Title OFFICER
Name JONES, KATHY
Address 103 HOLMES DR
City-State-Zip: PENSACOLA FL 32507

Title OFFICER
Name SCHNIDMAN, FRANK
Address 620 NORTH CHEROKEE AVE
City-State-Zip: DELAND FL 32724

Title OFFICER
Name PALMER, MARY D
Address 11410 SWIFT WATER CREEK
City-State-Zip: ORLANDO FL 32817

Title OFFICER
Name COOLIDGE, JENNIFER
Address 241 WEST RICH AVE
City-State-Zip: DELAND FL 32720

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: KATHY JONES _____

OFFICER, TREASURER

03/09/2022

Electronic Signature of Signing Officer/Director Detail

Date