

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20734

Entity Name: DRUG PREVENTION RESOURCE CENTER, INC.

Current Principal Place of Business:

621 SOUTH FLORIDA AVE.
LAKELAND, FL 33801

Current Mailing Address:

621 SOUTH FLORIDA AVE.
LAKELAND, FL 33801 US

FEI Number: 59-2844663

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELLISON, ANGELA P
621 SOUTH FLORIDA AVE
LAKELAND, FL 33801 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 PRESIDENT
Name CROWLEY, JEANETTE
Address P.O. BOX 391
City-State-Zip: BARTOW FL 33831

Title TREASURER
Name ROGERS, RYAN
Address 7301 US HIGHWAY 98 NORTH
City-State-Zip: LAKELAND FL 33809

Title 1VP
Name CORBAN, LESLEY
Address 1066 LAMP POST LANE
City-State-Zip: LAKELAND FL 33809

Title 2ND VICE PRESIDENT
Name MINCEY, WILLIE
Address 2842 COUNTRY CLUB ROAD
City-State-Zip: LAKELAND FL 33881

Title SECRETARY
Name WOLFE, GINNY
Address 1003 AVENUE X NW
City-State-Zip: WINTER HAVEN FL 33881

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: JEANETTE CROWLEY

PRESIDENT

02/18/2021

Electronic Signature of Signing Officer/Director Detail

Date