

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24731

Entity Name: FRIENDSHIP CLUB OF WARM MINERAL SPRINGS, INC.**Current Principal Place of Business:**12125 WARM MINERAL SPRINGS DRIVE
WARM MINERAL SPRINGS, FL 34287**Current Mailing Address:**12306 ALTAMIRA ST
NORTH PORT, FL 34287**FEI Number:** 65-0093860**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROTH, FRITZ
12306 ALTAMIRA ST
WARM MINERAL SPRINGS, FL 34287 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	P
Name	ROTH, ERIKA
Address	12306 ALTAMIRA ST
City-State-Zip:	NORTH PORT FL 34287

Title	SECRETARY
Name	ROTH, ANITA
Address	12306 ALTAMIRA ST.
City-State-Zip:	NORTH PORT FL 34287

Title	2 VP
Name	SCHLOGL, RUTH
Address	18431 MONET AVE.
City-State-Zip:	PORT CHARLOTTE FL 33948

Title	TD
Name	SCHLOGL, FRANK
Address	18431 MONET AVE:
City-State-Zip:	PORT CHARLOTTE FL 33948

Title	DIRECTOR
Name	PAVEK, MARINA
Address	1515 FOREST NELSON BVD.
City-State-Zip:	PORT CHARLOTTE FL 33952

Title	ASST. TREASURER
Name	LAVERDIERE, GERDA
Address	15033 LAKELAND CIRCLE SOUTH GULF COVE
City-State-Zip:	PORT CHARLOTTE FL 33981

Title	VP
Name	CARUSO, GISELTRUD
Address	3620 STAGHORN AVE.
City-State-Zip:	NORTH PORT FL 34286

Title	DIRECTOR
Name	STILLER, DAVID
Address	12309 ALTAMIRA ST.
City-State-Zip:	WARM MINERAL SPRINGS FL 34287

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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: FRANK SCHLOGL

TD

01/22/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	VP
Name	CARADONNA, MARGHERITA
Address	17327 WINTERGARTEN AVE.
City-State-Zip:	PORT CHARLOTTE FL 33948