

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25228

Entity Name: MASON CITY COMMUNITY CENTER, INC.

Current Principal Place of Business:

709 S.E. ORMOND WITT RD
LAKE CITY, FL 32025

Current Mailing Address:

VALERIE W. RYALS
709 S.E. ORMOND WITT RD.
LAKE CITY, FL 32025 US

FEI Number: 59-2892722

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMAS, DUANE E.
206 SOUTH MARION STREET
LAKE CITY, FL 32056 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 RYALS, VALERIE W.
Address 709 SOUTHEAST ORMOND WITT
 ROAD
City-State-Zip: LAKE CITY FL 32025

Title PD
Name DICKS, HARRY G
Address 1676 SOUTHEAST FAMILY ROAD
City-State-Zip: LULU FL 32061

Title TD
Name DEVEREUX, GLORIA A
Address 3628 S.E HIGH FALLS RD
City-State-Zip: LAKE CITY FL 32025

Title SECRETARY
Name WILLIAMS, NANCY
Address 668 S.W. BOYETTE TERR
City-State-Zip: LAKE CITY FL 32024

Title BOARD OF DIRECTORS
Name HARDEN, GREG
Address 1046 S.E. LESLIE WOOD LN.
City-State-Zip: LULU FL 32061

Title BOARD OF DIRECTORS
Name HARDEN, MELISSA
Address 1046 S.E. LESLIE WOOD LN
City-State-Zip: LULU FL 32061

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: GLORIA DEVEREUX

TREASURY

02/03/2023

Electronic Signature of Signing Officer/Director Detail

Date