

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28626

Entity Name: EXXONMOBIL RETIREES CLUB OF SOUTH FLORIDA, INC.**Current Principal Place of Business:**JOHN PROCTOR
6775 S.W. 89TH TER
PINECREST, FL 33156**Current Mailing Address:**JOHN PROCTOR
6775 S.W. 89TH TER
PINECREST, FL 33156 US**FEI Number:** 65-0106043**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PROCTOR, JOHN L
JOHN PROCTOR
6775 S.W. 89TH TER
PINECREST, FL 33156 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:** JOHN PROCTOR

02/21/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GLAB, EDWARD
Address 8467 SW 138 TERRACE
City-State-Zip: MIAMI FL 33158

Title DIRECTOR
Name PRESTON, EDWARD L
Address EDWARD PRESTON
6040 SW 64 AVE
City-State-Zip: MIAMI FL 33143

Title D
Name GUERRA, ODETTE
Address 7711 SW 102 PLACE
City-State-Zip: MIAMI FL 33173

Title VP
Name SALAZAR, MIRIAM
Address 3598 YACHT CLUB DRIVE #602
City-State-Zip: AVENTURA FL 33180

Title SECRETARY
Name YANES, LAURA
Address 5751 SW 56TH ST
City-State-Zip: MIAMI FL 33155

Title TREASURER
Name PROCTOR, JOHN
Address 6775 SW89TH TER
City-State-Zip: PINECREST FL 33156

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: JOHN PROCTOR

TREASURER

02/21/2023

Electronic Signature of Signing Officer/Director Detail

Date