## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33206

Entity Name: MOUNT DORA SISTER CITIES ASSOCIATION, INC.

**FILED** Apr 04, 2021 **Secretary of State** 7683815785CC

## **Current Principal Place of Business:**

MOUNT DORA SISTER CITIES ASSOCIATION %CITY OF MOUNT DORA 510 BAKER STREET

MOUNT DORA, FL 32757

## **Current Mailing Address:**

PO BOX 1651

MOUNT DORA, FL 32756-1651 US

FEI Number: 59-3004051 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GEARING, WILLIAM A JR. 904 E 11TH AVE MOUNT DORA, FL 32757 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: WILLIAM GEARING 04/04/2021

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title **TREASURER** Title **PRESIDENT** 

GEARING, WILLIAM A JR. Name Name CAMPBELL. JULIE Address

PO BOX 151 Address 2 ANNEX CIRCLE

904 E 11TH AVE City-State-Zip: MOUNT DORA FL 32757

MOUNT DORA FL 32757 City-State-Zip:

VΡ Title

Name TRUEBA, CYNTHIA Address 815 NORTHSIDE DR

City-State-Zip: MOUNT DORA FL 32757

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: WILLIAM A GEARING JR

**TREASURER** 

04/04/2021

Electronic Signature of Signing Officer/Director Detail

Date