

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34746

Entity Name: FLORIDA GERIATRICS SOCIETY, INC.

Current Principal Place of Business:

3973 LAKE JOYCE DR
LAND O LAKES, FL 34639

Current Mailing Address:

P. O. BOX 1403
LAND O LAKES, FL 34639 US

FEI Number: 59-3018212

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROWLEY, PEGGY A
3973 LAKE JOYCE DR
LAND O LAKES, FL 34639 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: PEGGY A CROWLEY

04/25/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name GLOTH, F. MICHAEL III
Address P. O. BOX 1403
City-State-Zip: LAND O LAKES FL 34639

Title PRESIDENT-ELECT
Name SULLIVAN, GREGORY A
Address P. O. BOX 1403
City-State-Zip: LAND O LAKES FL 34639

Title SECRETARY/TREASURER
Name ROBERTS, BETHAN A
Address P. BOX 1403
City-State-Zip: LAND O LAKES, FL 34639

Title IMMEDIATE PAST PRESIDENT
Name DANFORTH, DEBRA A
Address P.O. BOX 1403
City-State-Zip: LAND O LAKES FL 34639

Title PAST PRESIDENT
Name GARRY, RONALD T
Address P.O. BOX 1403
City-State-Zip: LAND O LAKES FL 34639

Title EXECUTIVE DIRECTOR
Name CROWLEY, PEGGY A
Address P.O. BOX 1403
City-State-Zip: LAND O LAKES FL 34639

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: PEGGY A CROWLEY

EXECUTIVE DIRECTOR

04/25/2024

Electronic Signature of Signing Officer/Director Detail

Date