Electronic Signature of Signing Officer/Director Detail

#### 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N34746

Entity Name: FLORIDA GERIATRICS SOCIETY, INC.

# **Current Principal Place of Business:**

1112 GOODLETTE ROAD SUITE 202 NAPLES, FL 34012

### **Current Mailing Address:**

1112 GOODLETTE ROAD SUITE 202 NAPLES, FL 34012 US

### FEI Number: 59-3018212

#### Name and Address of Current Registered Agent:

GARRY, RON 1112 GOODLETTE ROAD SUITE 202 NAPLES, FL 34012 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	E RON GARRY			01/15/2020
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	PRESIDENT ELECT	
Name	GARRY, RON	Name	DANFORTH, DEBRA	
Address	1112 GOODLETTE ROAD SUITE 202	Address	1112 GOODLETTE ROAD SUITE 202	
City-State-Zip:	NAPLES FL 34012	City-State-Zip:	NAPLES FL 34012	
Title	SECRETARY - TREASURER	Title	EXECUTIVE DIRECTOR	
Name	GLOTH, FRED MICHAEL III	Name	CROWLEY, PEGGY	
Address	1112 GOODLETTE ROAD SUITE 202	Address	1112 GOODLETTE ROAD SUITE 202	
City-State-Zip:	NAPLES FL 34012	City-State-Zip:	NAPLES FL 34012	

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: RONALD GARRY

01/15/2020

PRESIDENT

FILED Jan 15, 2020 Secretary of State 2903620064CC

Certificate of Status Desired: No

Date