2023 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

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 04/26/2023

Electronic Signature of Registered Agent

Date

Date

FILED Apr 26, 2023

Secretary of State

1741879717CC

Officer/Director Detail:

Title PRESIDENT Title PRESIDENT-ELECT

Name GLOTH, F. MICHAEL III Name SULLIVAN, GREGORY A

Address P. O. BOX 1403 Address P. O. BOX 1403

City-State-Zip: LAND O LAKES FL 34639 City-State-Zip: LAND O LAKES FL 34639

Title SECRETARY/TREASURER Title IMMEDIATE PAST PRESIDENT

Name ROBERTS, BETHAN A Name DANFORTH, DEBRA A

Address P. BOX 1403 Address P.O. BOX 1403

City-State-Zip: LAND O LAKES, FL 34639 City-State-Zip: LAND O LAKES FL 34639

TitlePAST PRESIDENTTitleEXECUTIVE DIRECTORNameGARRY, RONALD TNameCROWLEY, PEGGY A

Address P.O. BOX 1403 Address P.O. BOX 1403

Electronic Signature of Signing Officer/Director Detail

City-State-Zip: LAND O LAKES FL 34639 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 CROWLEY EXECUTIVE DIRECTOR 04/26/2023