#### 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47059

Entity Name: GARDEN CLUB OF FORT PIERCE INC.

FILED Feb 25, 2015 Secretary of State CC3657840963

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

911 PARKWAY

FT PIERCE, FL 34950

# **Current Mailing Address:**

4701 S. INDIAN RIVER DR. FT. PIERCE, FL 34982 US

FEI Number: 65-0137765 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

DALE, SARA.

4701 S. INDIAN RIVER DR. FT. PIERCE, FL 34982 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: SARA DALE 02/25/2015

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title P Title VP 1

Name DALE, SARA Name ORME, DIANE MRS.

Address 4701 S. INDIAN RIVER DR. Address 2701 N. INDIAN RIVER DR.

City-State-Zip: FT. PIERCE FL 34982 City-State-Zip: FT. PIERCE FL 34946

Title VP 2 Title ASST. TREASURER

Name MERRY, SAVOY MRS. Name RODEFFER, COLEEN

Address P. O. BOX 2168 Address 2105 S. INDIAN RIVER DR.

City-State-Zip: PALM CITY FL 34991 City-State-Zip: FT. PIERCE FL 34950-5905

Title RS

Name SANTOMARTINO, KATIE
Address 88 SOUTHPOINT DR.
City-State-Zip: FT. PIERCE FL 34949

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: COLEEN K. RODEFFER

ASST. TREASURER

02/25/2015