

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000006215

Entity Name: THE FLORIDA BAT CENTER, INC.**Current Principal Place of Business:**11234 N. SPRINGVALE TERRACE
DUNNELLON, FL 34433**Current Mailing Address:**11234 N. SPRINGVALE TERRACE
DUNNELLON, FL 34433 US**FEI Number:** 59-3291811**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BLISSETT-CLARK, SHARI L
11234 N. SPRINGVALE TERRACE
DUNNELLON, FL 34433 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:** SHARI BLISSETT-CLARK

02/13/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR, VP
Name KERN, WILLIAM HJR.
Address 840 GARDENIA LN
City-State-Zip: PLANTATION FL 33317

Title DIRECTOR
Name MARKS, GEORGE E
Address 1526 PINEWOOD STREET
City-State-Zip: CLEARWATER FL 33755

Title DIRECTOR
Name CLIFTON, AMY
Address 2326 EDEN PARKWAY
City-State-Zip: LAKELAND FL 33803

Title DIRECTOR, PRESIDENT
Name BLISSETT-CLARK, SHARI
Address 11234 N. SPRINGVALE TERRACE
City-State-Zip: DUNNELLON FL 34433

Title DIRECTOR, SECRETARY
Name RODRIGUEZ, JESSICA
Address 3240 SW 34TH STREET
APT. 320
City-State-Zip: Ocala FL 34474

Title DIRECTOR, TREASURER
Name BOZONE, DAN
Address P.O. BOX 766
City-State-Zip: PALM CITY FL 34991

Title DIRECTOR
Name MILLER, LEAH
Address P.O. BOX 56
City-State-Zip: EVERGLADES CITY FL 34139

Title DIRECTOR
Name RUSSELL, KATHY
Address 2500 ATLANTIC AVENUE
City-State-Zip: FERNANDINA BEACH FL 32034

Continues on page 2

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: SHARI BLISSETT-CLARK

PRESIDENT

02/13/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HORNER, ARIEL
Address 2075 GENOVA DRIVE
City-State-Zip: OVIEDO FL 32765

Title DIRECTOR
Name MAHONEY, HEATHER
Address 11234 N. SPRINGVALE TERRACE
City-State-Zip: DUNNELLON FL 34433