## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005118

Entity Name: DARDEN DIMES, INC.

**Current Principal Place of Business:** 

1000 DARDEN CENTER DR ORLANDO, FL 32837

**Current Mailing Address:** 

1000 DARDEN CENTER DR ORLANDO, FL 32837

FEI Number: 59-3525641 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC. 801 US HIGHWAY 1 NORTH PALM BEACH, FL 33408 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:

Electronic Signature of Registered Agent

Date

**FILED** Mar 20, 2020

**Secretary of State** 

0645241096CC

Officer/Director Detail :

Title DIRECTOR Title DIRECTOR

CARDENAS, RICARDO Name Name KIERNAN, DANIEL

1000 DARDEN CENTER DR 1000 DARDEN CENTER DR Address Address

City-State-Zip: ORLANDO FL 32837 ORLANDO FL 32837 City-State-Zip:

Title **SECRETARY** Title DIRECTOR Name ISAIA, MONE

Name CONNELLY, SUSAN M

Address 1000 DARDEN CENTER DR Address 1000 DARDEN CENTER DR

ORLANDO FL 32837 City-State-Zip: ORLANDO FL 32837 City-State-Zip:

Title ASST. SECRETARY Title ASST. TREASURER Name MORROW, ANTHONY G Name SIMMONS, ANGELA M

Address 1000 DARDEN CENTER DR 1000 DARDEN CENTER DR Address

ORLANDO FL 32837 City-State-Zip: ORLANDO FL 32837 City-State-Zip:

Title **TREASURER** Title DIRECTOR

Name JEWELL, ISAIAH G KING, SARAH H Name

1000 DARDEN CENTER DR Address 1000 DARDEN CENTER DR Address

City-State-Zip: ORLANDO FL 32837 ORLANDO FL 32837 City-State-Zip:

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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.

03/20/2020 SIGNATURE: ANGELA M. SIMMONS ASST. TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title PRESIDENT

Name GRIFFIN, JULIE A

Address 1000 DARDEN CENTER DR

City-State-Zip: ORLANDO FL 32837