Entity Name: THE DOWLING PARK VILLAGE SQUARE, INC.

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

C/O ADVENT CHRISTIAN VILLAGE 10680 DOWLING PARK DRIVE LIVE OAK, FL 32060

DOCUMENT# 628657

Current Mailing Address:

ADVENT CHRISTIAN VILLAGE P.O. BOX 4307 DOWLING PARK, FL 32064 US

FEI Number: 59-2269083

Name and Address of Current Registered Agent:

KENNON, TODD 582 W DUVAL ST LAKE CITY, FL 32056 US Certificate of Status Desired: Yes

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: TODD KENNON			02/13/2024
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	DIRECTOR	Title	PRESIDENT, CEO	
Name	SCHENCK, JAMES A	Name	CARTER, CRAIG	
Address	10641 DOWLING PARK DR	Address	10081 COUNTY ROAD 136	
City-State-Zip:	LIVE OAK FL 32060	City-State-Zip:	LIVE OAK FL 32060	
Title	CHAIRMAN, DIRECTOR	Title	TREASURER, CFO	
Name	CHAMBERS, ROLLY	Name	HETT, STEVEN	
Address	5053 SHARON WOODS LN	Address	22727 104TH STREET	
City-State-Zip:	CHARLOTTE NC 28210	City-State-Zip:	LIVE OAK FL 32060	
Title	S	Title	DIRECTOR	
Name	HILLIARD, KERI	Name	FENLASON, JOHN	
Address	10233 229TH LANE	Address	8451 135TH AVE SE	
City-State-Zip:	LIVE OAK FL 32060	City-State-Zip:	NEW CASTLE WA 98059	
Title	ASST. SECRETARY	Title	DIRECTOR	
Name	CRAWFORD, MARY	Name	THOMAS, RON	
Address	11504 COUNTY ROAD 252	Address	10926 S HAMPTON DR	
City-State-Zip:	MCALPIN FL 32062	City-State-Zip:	CHARLOTTE NC 28227-5442	2
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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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG CARTER

PRESIDENT/CEO

02/13/2024

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 13, 2024 Secretary of State 7289428997CC

Officer/Director Detail Continued :

Title	VC, DIRECTOR		
Name	ROSS, STEVE		
Address	139 SOUTH LAKE AVENUE		
City-State-Zip:	ALBANY NY 12208		