

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 8:00 am
Secretary of State

04-28-2008 90334 039 ****61.25

DOCUMENT # N02212



1. Entity Name
**FREEDOM SEVEN SENIOR CITIZENS COMMUNITY
CENTER, INC.**

Principal Place of Business
**5000 TOM WARRINER BLVD.
COCOA BEACH, FL 32931 US**

Mailing Address
**C/O LEONARD
1485 N. ATLANTIC AVE., #102
COCOA BEACH, FL 32931**



04222008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2423206

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LEONARD, L. GEORGE
1485 N. ATLANTIC AVE.
#102
COCOA BEACH, FL 32931**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
DION, CAROLYN
223 CANAVERAL BEACH RD
CAPE CANAVERAL, FL 32920**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
LEONARD, GEORGE
1485 N. ATLANTIC AVE
COCOA BEACH, FL 32931**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
SEYMOUR, MARTHA
307 E CENTRAL PL
CAPE CANAVERAL, FL 32920**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BARRY, JOYCE
504 TYLER
CAPE CANAVERAL, FL 32920**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

L. George Leonard

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/08

DATE

*321 -
799-1691*

Daytime Phone #