

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 706457

**FILED**  
**Apr 23, 2017**  
**Secretary of State**  
**CC8160833281**

**Entity Name:** SOROSIS CLUB OF ORANGE CITY FLORIDA, INC.

**Current Principal Place of Business:**

222 EAST UNIVERSITY AVENUE  
ORANGE CITY, FL 32763

**Current Mailing Address:**

222 EAST UNIVERSITY AVENUE  
ORANGE CITY, FL 32763 US

**FEI Number:** 59-6165113

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MASSEY, ELLEE M  
616 W PATLIN AVE  
ORANGE CITY, FL 32763 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

**Officer/Director Detail :**

Title VP  
Name WOOD, MARSHA VP  
Address 1355 10TH STREET  
City-State-Zip: ORANGE CITY FL 32763

Title VP  
Name FOWLER, MICHELLE P  
Address 1595 BROWN AVE.  
City-State-Zip: ORANGE CITY FL 32763

Title TD  
Name MASSEY, ELLEE  
Address 616 W PATLIN AVE  
City-State-Zip: ORANGE CITY FL 32763

Title VP  
Name SOYAK, MARY  
Address 924 WEST FRENCH AVENUE  
City-State-Zip: ORANGE CITY FL 32763

Title PRESIDENT  
Name SEYMOUR, SHELIA VP  
Address 2855 BELKTON COURT  
City-State-Zip: DELTONA FL 32738

Title OTHER  
Name TREMBLAY, MARIKA  
Address 1270 5TH STREET  
City-State-Zip: ORANGE CITY FL 32763

Title SECRETARY  
Name SCOTTON, LAURIE  
Address 836 ARAWANA DRIVE  
City-State-Zip: ORANGE CITY FL 32763

*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:** ELLEE M. MASSEY

**TD**

**04/23/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date