

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706457

FILED
Apr 23, 2022
Secretary of State
3771382759CC

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 PRESIDENT
Name WOOD, MARCIA P
Address 1355 10TH STREET
City-State-Zip: ORANGE CITY FL 32763

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

Title 3 RD VP
Name FOWLER, MICHELLE 3 RD VP
Address 1595 BROWN AVE
City-State-Zip: ORANGE CITY FL 32763

Title 1 ST VP
Name WALL, EVELYN 1 ST VP
Address 629 PATLIN AVENUE
City-State-Zip: ORANGE CITY FL 32763

Title 2 ND VP
Name CRENSHAW, RENEE 2 ND VP
Address 101 NORTH AMELIA AVENUE
City-State-Zip: DELAND FL 32724

Title RS
Name SOYAK, MARY RS
Address 924 WEST FRENCH AVENUE
City-State-Zip: ORANGE CITY FL 32723

Title HH VICE CHAIRMAN
Name RILEY, BETH
Address 421 PATLIN AVENUE
City-State-Zip: ORANGE CITY FL 32763

Title CS
Name BRIGGS, AMY CS
Address 245 WEST WISCONSIN AVENUE
City-State-Zip: ORANGE CITY FL 32763

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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.

SIGNATURE: ELLEE MASSEY

TREASURER

04/23/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PARLIAMENTARIAN
Name SCHROEDER, MARY
Address 410 WEST HOLLY DRIVE
City-State-Zip: ORANGE CITY FL 32763

Title HH VICE CHAIRMAN
Name BERTRAND, JULIE
Address 569 PEARL STREET
City-State-Zip: ORANGE CITY FL 32763