

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708828

FILED
Apr 15, 2021
Secretary of State
8717267417CC

Entity Name: THE ASSOCIATION FOR RETARDED CITIZENS, SOUTH FLORIDA, INC.

Current Principal Place of Business:

15280 NW 79 COURT, SUITE 251
MIAMI LAKES, FL 33016

Current Mailing Address:

15280 NW 79 COURT, SUITE 251
MIAMI LAKES, FL 33016 US

FEI Number: 59-0839562

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PARRA, GABRIEL
15280 NW 79 COURT, SUITE 251
MIAMI LAKES, FL 33016 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 D
Name SALAZAR-REALINI, HELEN
Address 15280 NW 79 COURT, SUITE 251
City-State-Zip: MIAMI LAKES FL 33016

Title CHAIRMAN OF THE BOARD
Name PAUL, SWEENEY
Address 15280 NW 79 COURT, SUITE 251
City-State-Zip: MIAMI LAKES FL 33016

Title DIRECTOR
Name MESSER, MICHAEL E
Address 15280 NW 79 COURT, SUITE 251
City-State-Zip: MIAMI LAKES FL 33016

Title SECRETARY
Name ZAMORA, HILDE
Address 15280 NW 79 COURT, SUITE 251
City-State-Zip: MIAMI LAKES FL 33016

Title DIRECTOR
Name GOTCHELL, ANDREW
Address 15280 NW 79 COURT, SUITE 251
City-State-Zip: MIAMI LAKES FL 33016

Title ED
Name PARRA, GABRIEL
Address 15280 NW 79 COURT, SUITE 251
City-State-Zip: MIAMI LAKES FL 33016

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: GABRIEL PARRA

EX DIRECTOR

04/15/2021

Electronic Signature of Signing Officer/Director Detail

Date