

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714816

Entity Name: THE MAE VOLEN SENIOR CENTER, INC.**Current Principal Place of Business:**1515 W. PALMETTO PARK ROAD
BOCA RATON, FL 33486**Current Mailing Address:**1515 W. PALMETTO PARK ROAD
BOCA RATON, FL 33486 US**FEI Number: 59-2695062****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LUGO, ELIZABETH
1515 W. PALMETTO PARK ROAD
BOCA RATON, FL 33486 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	TREASURER
Name	WALTON, R. KEITH
Address	1515 W. PALMETTO PARK ROAD
City-State-Zip:	BOCA RATON FL 33486

Title	SD
Name	SEIBERT, NINA
Address	1515 W. PALMETTO PARK ROAD
City-State-Zip:	BOCA RATON FL 33486

Title	VC
Name	FREUDENBERG, PATRICIA
Address	1515 W. PALMETTO PARK ROAD
City-State-Zip:	BOCA RATON FL 33486

Title	PCEO
Name	LUGO, ELIZABETH
Address	1515 W PALMETTO PARK RD
City-State-Zip:	BOCA RATON FL 33486

Title	CHAIRMAN
Name	SIMON, ERNEST
Address	1515 W. PALMETTO PARK ROAD
City-State-Zip:	BOCA RATON FL 33486

Title	VC
Name	LISKA, LANGSTON
Address	1515 W. PALMETTO PARK ROAD
City-State-Zip:	BOCA RATON FL 33486

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: ELIZABETH LUGO**CEO****02/09/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date