

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 717926

Entity Name: COCOA-ROCKLEDGE GARDEN CLUB, INC.

Current Principal Place of Business:

1493 S FISKE BLVD.
ROCKLEDGE, FL 32956-0111

Current Mailing Address:

P.O. BOX 560111
ROCKLEDGE, FL 32956

FEI Number: 59-1056201

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRYAN, MAUREEN
1493 S FISKE BLVD.
ROCKLEDGE, FL 32956-0111 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: MAUREEN BRYAN

03/19/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRES
Name SHIRL, PHILLIPS
Address P.O. BOX 560111
City-State-Zip: ROCKLEDGE FL 32956

Title 1VPD
Name BROWN, PHYLLIS
Address P.O. BOX 560111
City-State-Zip: ROCKLEDGE FL 32956

Title 2VP
Name SZUCHY, EILEEN
Address P.O. BOX 560111
City-State-Zip: ROCKLEDGE FL 32956

Title SECRETARY, RECORDING
Name PUNCKE, ROSE
Address P.O. BOX 560111
City-State-Zip: ROCKLEDGE FL 32956

Title TREASURER
Name BRYAN, MAUREEN
Address P.O. BOX 560111
City-State-Zip: ROCKLEDGE FL 32956

Title CS
Name BENNITT, SUZANNE
Address P.O. BOX 560111
City-State-Zip: ROCKLEDGE FL 32956

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: MAUREEN BRYAN

TREASURER

03/19/2019

Electronic Signature of Signing Officer/Director Detail

Date