

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 719680

**Entity Name:** NEIGHBORHOOD SERVICE CENTER, INC.**Current Principal Place of Business:**608 AVENUE S N E  
WINTER HAVEN, FL 33881**Current Mailing Address:**P.O. BOX 3311  
WINTER HAVEN, FL 33885 US**FEI Number:** 59-1363593**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JONES, GLENDA W  
608 AVE S N E  
WINTER HAVEN, FL 33881 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           | PD                    |
| Name            | JOHNSON, III. U.J.    |
| Address         | 560 SEARS AVE         |
| City-State-Zip: | WINTER HAVEN FL 33881 |

|                 |                                 |
|-----------------|---------------------------------|
| Title           | SD                              |
| Name            | HUNTER, EDYTHE                  |
| Address         | P.O. BOX 3516- 507 AVENUE T, NE |
| City-State-Zip: | WINTER HAVEN FL 33885           |

|                 |                       |
|-----------------|-----------------------|
| Title           | D                     |
| Name            | NIERMAN, STEVE        |
| Address         | 200 AVE F NE          |
| City-State-Zip: | WINTER HAVEN FL 33881 |

|                 |                       |
|-----------------|-----------------------|
| Title           | VD                    |
| Name            | JONES, BENJAMIN R     |
| Address         | 2410 N SWAN DRIVE NE  |
| City-State-Zip: | WINTER HAVEN FL 33881 |

|                 |                          |
|-----------------|--------------------------|
| Title           | D                        |
| Name            | HUNTER, MAXIE E          |
| Address         | 228 COLLEGE GROVE CIRCLE |
| City-State-Zip: | WINTER HAVEN FL 33881    |

|                 |                       |
|-----------------|-----------------------|
| Title           | TR                    |
| Name            | PERKINS, JAMES        |
| Address         | 2116 EDWIN ST NE      |
| City-State-Zip: | WINTER HAVEN FL 33881 |

*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: BENJAMIN R. JONES****VD****01/17/2020**

Electronic Signature of Signing Officer/Director Detail

Date