## **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 729935** 

Entity Name: OKEECHOBEE COUNCIL ON AGING, INC.

FILED Feb 03, 2023 Secretary of State 4380231955CC

## **Current Principal Place of Business:**

230 S BARFIELD HWY PAHOKEE. FL 33476-1834

## **Current Mailing Address:**

230 S BARFIELD HWY

PAHOKEE. FL 33476-1834 US

FEI Number: 59-1544835 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SHIMBERG, ROBERT ESQ HILL, WARD, HENDERSON 101 E. KENNEDY BLVD #3700 TAMPA, FL 33602 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: ROBERT SHIMBERG 02/03/2023

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title

Title DIRECTOR Title CEO

NameBLEVINS, JOHNNIENameHURT, EDWARD WAddress969 SW 39TH LANEAddress100 SW 75TH STREET

City-State-Zip: OKEECHOBEE FL 34974

City-State-Zip: GAINESVILLE FL 32607-5776

Name BOHLEN, REGINA Title DIRECTOR

Address P.O. BOX 141

Address 1547 REV. JESSE BIGGS BLVD
City-State-Zip: PAHOKEE FL 33476

City-State-Zip: PAHOKEE FL 33476

Title DIRECTOR

Name BANKS, HIKEEM

Address 2021 SW PROVIDENCE PLACE

City-State-Zip: PORT ST. LUCIE FL 34953

DIRECTOR

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: EDWARD HURT

Electronic Signature of Signing Officer/Director Detail

**CEO** 

02/03/2023

Date