

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

DOCUMENT# 731397

**Entity Name:** WESTMINSTER RETIREMENT COMMUNITIES FOUNDATION, INC.**FILED**  
**Jan 05, 2023**  
**Secretary of State**  
**9119184095CC****Current Principal Place of Business:**80 WEST LUCERNE CIRCLE  
ORLANDO, FL 32801**Current Mailing Address:**80 WEST LUCERNE CIRCLE  
ORLANDO, FL 32801 US**FEI Number: 23-7414048****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**KEITH, HENRY T  
80 WEST LUCERNE CIRCLE  
ORLANDO, FL 32801 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	SECRETARY
Name	FAUBEL, MEGAN
Address	80 WEST LUCERNE CIRCLE
City-State-Zip:	ORLANDO FL 32801

Title	CEO, PRESIDENT
Name	ROGERS, TERENCE E
Address	80 WEST LUCERNE CIRCLE
City-State-Zip:	ORLANDO FL 32801

Title	COO, EXECUTIVE VICE PRESIDENT
Name	HENNIS, GARRY
Address	80 WEST LUCERNE CIRCLE
City-State-Zip:	ORLANDO FL 32801

Title	CFO, TREASURER, EXECUTIVE VICE PRESIDENT
Name	KEITH, HENRY T
Address	80 WEST LUCERNE CIRCLE
City-State-Zip:	ORLANDO FL 32801

Title	CHAIRMAN
Name	HILLENMEYER, JOHN
Address	80 W. LUCERNE CIRCLE
City-State-Zip:	ORLANDO FL 32801

*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: MEGAN FAUBEL****SECRETARY****01/05/2023**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date