2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2025
Secretary of State
4100086498CC

DOCUMENT# 732240

Entity Name: FLORIDA COLLEGE SYSTEM ACTIVITIES ASSOCIATION INCORPORATED

Current Principal Place of Business:

1725 MAHAN DRIVE
TALLAHASSEE, FL 32308

Current Mailing Address:

P.O. BOX 8
TALLAHASSEE, FL 32302 US

FEI Number: 59-6193023

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WARREN, KELLY N
1725 MAHAN DRIVE
TALLAHASSEE, FL 32308 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: KELLY N WARREN 03/06/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	BARRETT, LAWRENCE DR.
Address	149 SOUTHEAST VOCATIONAL PLACE
City-State-Zip:	LAKE CITY FL 32025

Title	DIRECTOR
Name	LORENZ, GEORGIA DR.
Address	100 WELDON WAY
City-State-Zip:	SANFORD FL 32773

Title	DIRECTOR
Name	PARKER, AVA DR.
Address	4200 CONGRESS AVE.
City-State-Zip:	LAKE WORTH FL 33461

Title	DIRECTOR
Name	ASTRAB, DONALD
Address	111 E. OLAS BLVD.
City-State-Zip:	FT. LAUDERDALE FL 33301

Title	DIRECTOR
Name	MURDAUGH, JAMES DR.
Address	444 APPLEYARD DR.
City-State-Zip:	TALLAHASSEE FL 32304

Title	DIRECTOR
Name	CLEMMENS, SARAH DR.
Address	3094 INDIAN CIRCLE
City-State-Zip:	MARIANNA FL 32446

Title	EXECUTIVE DIRECTOR
Name	WARREN, KELLY N
Address	1725 MAHAN DRIVE
City-State-Zip:	TALLAHASSEE FL 32308

Title	DIRECTOR
Name	HENNINGSEN, JIM DR.
Address	3001 SW COLLEGE RD.
City-State-Zip:	OCALA FL 34474

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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: KELLY WARREN EXECUTIVE DIRECTOR 03/06/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LOBASSO, THOMAS DR.
Address P. O. BOX 2811
City-State-Zip: DAYTONA BEACH FL 32120

Title DIRECTOR
Name ALLBRITTEN, JEFF DR.
Address 8099 COLLEGE PARKWAY
City-State-Zip: FT. MYERS FL 33919

Title DIRECTOR
Name GUEVERRA, JONATHAN DR.
Address 5901 COLLEGE ROAD
City-State-Zip: KEY WEST FL 33040

Title DIRECTOR
Name MCDONALD, GLEN DR.
Address 5230 W. HIGHWAY 98
City-State-Zip: PANAMA CITY FL 32401

Title DIRECTOR
Name BYRD, LAURA DR.
Address 9501 U. S. HIGHWAY 441
City-State-Zip: LEESBURG FL 34788

Title DIRECTOR
Name PONDER, MELVIN
Address 100 COLLEGE BLVD.
City-State-Zip: NICEVILLE FL 32578

Title DIRECTOR
Name MEADOWS, ED DR.
Address 1000 COLLEGE BLVD
City-State-Zip: PENSACOLA FL 32504

Title DIRECTOR
Name BROADIE II, PAUL DR.
Address 3000 NW 83RD STREET
City-State-Zip: GAINESVILLE FL 32606

Title DIRECTOR
Name GREGORY, TOMMY
Address P. O. BOX 1849
City-State-Zip: BRADENTON FL 34206

Title DIRECTOR
Name PICKENS, JOE ESQ.
Address 5001 ST. JOHNS AVENUE
City-State-Zip: PALATKA FL 32177

Title PRESIDENT
Name BOSLEY, MIKE DR.

Title DIRECTOR
Name RICHEY, JAMES DR.
Address 1519 CLEARLAKE ROAD
City-State-Zip: COCOA FL 32922

Title DIRECTOR
Name AVENDANO, JOHN
Address 501 W. STATE STREET
City-State-Zip: JACKSONVILLE FL 32202

Title DIRECTOR
Name ATWATER, KENNETH DR.
Address P. O. BOX 31127
City-State-Zip: TAMPA FL 33631

Title DIRECTOR
Name MOORE, TIMOTHY DR.
Address 3209 VIRGINIA AVENUE
City-State-Zip: FT. PIERCE FL 34981

Title DIRECTOR
Name PUMARIEGA, MADELINE
Address 300 NE 2ND AVENUE
City-State-Zip: MIAMI FL 33132

Title DIRECTOR
Name PISORS, JESSIE DR.
Address 10230 RIDGE ROAD
City-State-Zip: NEW PORT RICHEY FL 34654

Title DIRECTOR
Name FALCONETTI, ANGELA DR.
Address 999 AVENUE H, NE
City-State-Zip: WINTER HAVEN FL 33881

Title DIRECTOR
Name HAWKINS, FRED
Address 600 W. COLLEGE DRIVE
City-State-Zip: AVON PARK FL 33825

Title DIRECTOR
Name WILLIAMS, TONJUA DR.
Address P. O. BOX 13489
City-State-Zip: ST. PETERSBURG FL 33733

Title DIRECTOR
Name PLINSKE, KATHLEEN DR.
Address P.O. BOX 3028
City-State-Zip: ORLANDO FL 32802

Address VALENCIA COLLEGE
1800 S. KIRKMAN ROAD
City-State-Zip: ORLANDO FL 32811