

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763137

Entity Name: FLORIDA ASSOCIATION OF FAMILY AND CONSUMER SCIENCES, INC.**Current Principal Place of Business:**3175 57TH AVE CIR E
BRADENTON, FL 34203**Current Mailing Address:**3175 57TH AVENUE CIRCLE EAST
BRADENTON, FL 34203**FEI Number: 59-6141219****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**MCGREW, DONNA
3175 57TH AVE CIR E
BRADENTON, FL 34203 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	MCQUEEN, BETTY
Address	15 PARADISE PLAZA #177
City-State-Zip:	SARASOTA FL 34239

Title	PED
Name	LYNCH, WENDY
Address	109 SEA GARDEN CT
City-State-Zip:	ST AUGUSTINE FL 32080

Title	VP
Name	HAMILTON, NANCY
Address	7700 TWIN EAGLE LANE
City-State-Zip:	FORT MYERS FL 33912

Title	VP
Name	LAPHAM, ENID
Address	7484 KEY DEER COURT
City-State-Zip:	FT. MYERS FL 33912

Title	S
Name	MCGREW, DONNA
Address	3175 57TH AVENUE CIRCLE E
City-State-Zip:	BRADENTON FL 34203

Title	TD
Name	MCGREW, DONNA
Address	3175 57TH AVE CIR EAST
City-State-Zip:	BRADENTON FL 34203

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: DONNA MCGREW**04/01/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date