#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 766910** 

Entity Name: SUN CITY CENTER LAPIDARY CLUB, INC.

**FILED** Mar 05, 2024 **Secretary of State** 3012623590CC

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

915 CHERRY HILLS DRIVE

SUITE E

SUN CITY CENTER, FL 33573

# **Current Mailing Address:**

P.O. BOX 5675

SUN CITY CENTER, FL 33571 US

FEI Number: 59-2151734 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BOYDSTON, TED L 1804 COLUMBINE PL SUN CITY CENTER, FL 33573 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: TED L BOYDSTON 03/05/2024

> Date Electronic Signature of Registered Agent

#### Officer/Director Detail:

**PRESIDENT** VΡ Title Title

LIN. OPGENORTH Name Name STOWE, SHERRY

Address 308 CALOSSA PALMS COURT Address 2223 NEW BEDFORD DRIVE City-State-Zip: SUN CITY CENTER FL 33573 City-State-Zip: SUN CITY CENTER FL 33573

Title ASST. SECRETARY/TREASURER Title **TREASURER** 

Name SIRAK, SHARON Name BOYDSTON, TED

Address 1310 LAMBDETH COURT Address 1804 COLUMBINE PLACE SUN CITY CENTER FL 33573

City-State-Zip: SUN CITY CENTER FL 33573 City-State-Zip:

Title **SECRETARY** Title **DIRECTOR** HURLEY, JINNY Name Name JOHNSON, VICKI

212 N BROCKFIELD DRIVE Address Address 709 SAHARA DRIVE

City-State-Zip: SUN CITY CENTER FL 33573 City-State-Zip: SUN CITY CENTER FL 33573

Title DIRECTOR Title **DIRECTOR** 

Name SWANEY, MAUREEN Name BITTMAN, KATHY Address 1509 LAUGHTON PLACE Address 1702 WOLF LAUREL DRIVE SUN CITY CENTER FL 33573 City-State-Zip:

City-State-Zip: SUN CITY CENTER FL 33573

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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.

03/05/2024 SIGNATURE: TED BOYDSTON **TREASURER** 

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR
Name KERR, JOANNE

Address 302 BROCKFIELD DRIVE

City-State-Zip: SUN CITY CENTER FL 33573