

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

DOCUMENT# N01000004072

**Entity Name:** FRIENDS OF CASA FELIZ, INC.**Current Principal Place of Business:**656 PARK AVE N.  
WINTER PARK, FL 32789**Current Mailing Address:**P.O. BOX 591  
WINTER PARK, FL 32790**FEI Number:** 59-3737446**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**OMOTO, SUSAN  
656 PARK AVENUE NORTH  
WINTER PARK, FL 32789 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:** SUSAN OMOTO

01/31/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, TREASURER  
Name WARD, TAYLOR  
Address P.O. BOX 591  
City-State-Zip: WINTER PARK FL 32790

Title CHAIRMAN  
Name KILBY, RICK  
Address P.O. BOX 591  
City-State-Zip: WINTER PARK FL 32790

Title EXECUTIVE DIRECTOR  
Name OMOTO, SUSAN  
Address P.O. BOX 591  
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR  
Name FERRER, NATHAN  
Address 656 PARK AVE N.  
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR  
Name GALLARDO, REBECCA  
Address 656 PARK AVE N.  
City-State-Zip: WINTER PARK FL 32789

Title DIRECTOR  
Name ROGERS, JACK  
Address P.O. BOX 591  
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR  
Name BOARD, FRANK  
Address P.O. BOX 591  
City-State-Zip: WINTER PARK FL 32790

Title DIRECTOR  
Name MORGAN, NATHAN  
Address P.O. BOX 591  
City-State-Zip: WINTER PARK FL 32790

*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:** SUSAN OMOTO**EXECUTIVE DIRECTOR**

01/31/2023

Electronic Signature of Signing Officer/Director Detail

Date