

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002866

Entity Name: ADVOCATES & GUARDIANS FOR THE ELDERLY & DISABLED, INC.**FILED**
Jan 21, 2025
Secretary of State
0754875946CC**Current Principal Place of Business:**1024 FLORIDA CENTRAL PKWY
LONGWOOD, FL 32750**Current Mailing Address:**1024 FLORIDA CENTRAL PKWY
LONGWOOD, FL 32750 US**FEI Number: 75-3033804****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HOYT, PEGGY R
254 PLAZA DR
OVIEDO, FL 32765 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	PRESIDENT
Name	DEXTER, ALICE S
Address	604-118 CHESTNUT OAK CIR
City-State-Zip:	ALTAMONTE SPRINGS FL 32701

Title	BOARD MEMBER, TREASURER
Name	CYNTHIA, CHASE
Address	1908 NEEDHAM ROAD
City-State-Zip:	APOPKA FL 32712

Title	EXECUTIVE DIRECTOR
Name	BARTON, NICHOLAS O
Address	1201 HOMOSASSA COURT
City-State-Zip:	LONGWOOD FL 32779

Title	SECRETARY
Name	LEWIS, TERRY
Address	1024 FLORIDA CENTRAL PARKWAY
City-State-Zip:	LONGWOOD FL 32750

Title	BOARD MEMBER
Name	PILCHER, DAVID
Address	1024 FLORIDA CENTRAL PARKWAY
City-State-Zip:	LONGWOOD FL 32750

Title	BOARD MEMBER
Name	LYLE, BRENDA
Address	1024 FLORIDA CENTRAL PARKWAY
City-State-Zip:	LONGWOOD FL 32750

Title	OFFICER
Name	RENZI, LAURIE
Address	1024 FLORIDA CENTRAL PARKWAY
City-State-Zip:	LONGWOOD FL 32750

Title	OFFICER
Name	MARCH, SUSAN
Address	1024 FLORIDA CENTRAL PARKWAY
City-State-Zip:	LONGWOOD FL 32750

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: NICHOLAS O. BARTON**EXECUTIVE DIRECTOR****01/21/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date