

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006017

Entity Name: CENTRAL FLORIDA CODE ENFORCEMENT ASSOCIATION, INC.**Current Principal Place of Business:**1776 JACK OATES BLVD
ROCKLEDGE, FL 32955**Current Mailing Address:**P. O. BOX 950129
LAKE MARY, FL 32795 US**FEI Number: 75-3055713****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCDONALD, MATTHEW
95 TRIPLETT LAKE DR
CASSELBERRY, FL 32707 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:** MATTHEW MCDONALD

04/25/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	MCDONALD, MADILANA
Address	1776 JACK OATES BOULEVARD
City-State-Zip:	ROCKLEDGE FL 32955

Title	SECRETARY
Name	GERMAN, MICHELLE
Address	900 E. STRAWBRIDGE AVENUE 2ND FLOOR
City-State-Zip:	MELBOURNE FL 32901

Title	SGT-AT-ARMS
Name	FLEMING, BRUCE
Address	165 E CRYSTAL LAKE AVENUE
City-State-Zip:	LAKE MARY FL 32746

Title	VP
Name	GLEASON, SEAN
Address	100 E MEYERS BOULEVARD
City-State-Zip:	MASCOTTE FL 34753

Title	TREASURER
Name	MCDONALD, MATTHEW
Address	95 TRIPLETT LAKE DR
City-State-Zip:	CASSELBERRY FL 32707

Title	PAST PRESIDENT
Name	FLEMING, BRUCE
Address	165 E. CRYSTAL LAKE AVENUE
City-State-Zip:	LAKE MARY FL 32746

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: MATTHEW MCDONALD**TREASURER**

04/25/2021

Electronic Signature of Signing Officer/Director Detail

Date