

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009094

FILED
Feb 01, 2018
Secretary of State
CC0691351990

Entity Name: APPLIED CLIENT NETWORK WEST CENTRAL FLORIDA, INC.

Current Principal Place of Business:

1000 WEKIVA SPRINGS RD
LONGWOOD, FL 32779

Current Mailing Address:

1000 WEKIVA SPRINGS RD
LONGWOOD, FL 32779 US

FEI Number: 65-0649607

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SINERIZ, CYNTHIA G
5216 SUMMERLIN COMMONS BLVD
SUITE 200
FORT MYERS, FL 33907 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: CYNTHIA G SINERIZ

02/01/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SINERIZ, CYNTHIA G
Address 5216 SUMMERLIN COMMONS BLVD -
 STE. 200
City-State-Zip: FORT MYERS FL 33907

Title VP
Name MEAD, KRISTIN
Address C/O BOYD INSURANCE
 717 MANATEE AVE W #300
City-State-Zip: BRADENTON FL 34205

Title SECRETARY
Name WHITAKER, JENNIFER
Address C/O HEACOCK INSURANCE GROUP
 379 LAKE JUNE RD
City-State-Zip: LAKE PLACID FL 33852

Title TREASURER
Name RIDEOUT, AMBER
Address C/O MORSE INSURANCE AGENCY,
 INC.
 1000 WEKIVA SPRINGS RD
City-State-Zip: LONGWOOD FL 32779

Title DIRECTOR
Name LERCH, KATHRYN
Address C/O DARR SCHACKOW INSURANCE
 5200-B WEST NEWBERRY RD
City-State-Zip: GAINESVILLE FL 32607

Title DIRECTOR
Name MULRAIN, TAMMY
Address C/O BROWN INSURANCE SERVICES
 2401 WEST BAY DRIVE, STE 603
City-State-Zip: LARGO FL 33770

Title DIRECTOR
Name MALIOZZI, MELISSA
Address C/O JOHN M GLOVER AGENCY
 17051 DORMAN RD
City-State-Zip: LITHIA FL 33547

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: AMBER RIDEOUT

TREASURER

02/01/2018

Electronic Signature of Signing Officer/Director Detail

Date