## **2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05231

Entity Name: MOUNT DORA CENTER FOR THE ARTS, INC.

FILED Feb 08, 2019 Secretary of State 1899810152CC

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

138 E 5TH AVENUE MT. DORA, FL 32757

## **Current Mailing Address:**

138 E 5TH AVENUE MT. DORA, FL 32757

FEI Number: 59-2470958 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ZINKOFSKY, NANCY 138 E. 5TH AVE MOUNT DORA, FL 32757 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: NANCY A. ZINKOFSKY 02/08/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title P Title VP

NameWARD, OZELLNameJONES, LYNNAddress318 EAST JACKSON AVENUEAddress1331 HEIM ROAD

City-State-Zip: MOUNT DORA FL 32757 City-State-Zip: MOUNT DORA FL 32757

Title T Title S

Name BELMONTES, JESSICA Name LOWERY, BILL

Address 25604 ABERDOVEY AVENUE Address 8904 BRIDGEPORT BAY CIRCLE

City-State-Zip: SORRENTO FL 32776 City-State-Zip: MOUNT DORA FL 32757

Title D

Name ZINKOFSKY, NANCY
Address 33 COVE LANE
City-State-Zip: EUSTIS FL 32726

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: NANCY A ZINKOFSKY

Electronic Signature of Signing Officer/Director Detail

**DIRECTOR** 

02/08/2019

Date