

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009771

Entity Name: DOWN SYNDROME ASSOCIATION OF THE EMERALD COAST, INC.

FILED
Feb 27, 2025
Secretary of State
1452997883CC

Current Principal Place of Business:

1804 CAROLINA AVE
LYNN HAVEN, FL 32444

Current Mailing Address:

PO BOX 9326
PANAMA CITY BEACH, FL 32413 US

FEI Number: 87-0779831

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMITH CPA' & ASSOCIATES
4581 WESTON RD
367
WESTON, FL 33331 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: SHAUN SMITH

02/27/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name KOLMETZ, LAUREN
Address 518 NORTH BAY DRIVE
City-State-Zip: PANAMA CITY FL 32444

Title SECRETARY
Name MODAWELL, CAROLYN
Address 609 PENNSYLVANIA AVE
City-State-Zip: LYMN HAVEN FL 32444

Title PRESIDENT
Name MISHOE, ROSE
Address 2601 PEARCY RD
City-State-Zip: PANAMA CITY FL 32404

Title BOARD MEMBER
Name SUPER, TONY
Address 3153 MEADOW STREET
City-State-Zip: LYNN HAVEN FL 32444

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: LAUREN KOLMETZ

TREASURER

02/27/2025

Electronic Signature of Signing Officer/Director Detail

Date