

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15000003971

Entity Name: WEST ORANGE SENIORS, INC.**Current Principal Place of Business:**1701 ADAIR STREET
OCOE, FL 34761**Current Mailing Address:**1701 ADAIR STREET
OCOE, FL 34761**FEI Number:** 26-1616276**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALERA, MICHAEL
1701 ADAIR STREET
OCOE, FL 34761 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:** MICHAEL VALERA

01/10/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP
Name	MYERS, LARRY
Address	1727 THOROUGHbred DR.
City-State-Zip:	GOTHA FL 34734

Title	SD
Name	PETERSON, GENEVA
Address	808 URSULA ST.
City-State-Zip:	OCOE FL 34761

Title	TD
Name	GILGER, DALE
Address	9368 LAKE FISCHER BLVD.
City-State-Zip:	GOTHA FL 34734

Title	PD
Name	VARELA, MICHAEL
Address	1701 ADAIR ST.
City-State-Zip:	OCOE FL 34761

Title	VP
Name	CONLEY, MARLENE
Address	1701 ADAIR STREET
City-State-Zip:	OCOE FL 34761

Title	ADMINISTRATOR
Name	VARELA, MARY TERESA
Address	1701 ADAIR STREET
City-State-Zip:	OCOE FL 34761

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: DALE GILGER**TREASURER**

01/10/2020

Electronic Signature of Signing Officer/Director Detail

Date