

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000001208

Entity Name: FWC OFFICERS ASSOCIATION, INC.**Current Principal Place of Business:**620 S. MERIDIAN ST.
TALLAHASSEE, FL 32399**Current Mailing Address:**P.O. BOX 3112
TALLAHASSEE, FL 32315 US**FEI Number:** 87-1143684**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GRIMES, KATELYN
620 S. MERIDIAN ST.
TALLAHASSEE, FL 32399 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:** KATELYN GRIMES

02/05/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BOYD, CHARLES E III
Address 5044 BRILL POINT
City-State-Zip: TALLAHASSEE FL 32312

Title EXECUTIVE DIRECTOR
Name GRIMES, KATELYN
Address 5702 CHARLES SAMUEL DRIVE
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name KLEPPER, ROBERT
Address 2040 OWENBY DRIVE
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name YANEZ, RANDY
Address 11490 SUMTER GROVE CIRCLE
 APARTMENT #2103
City-State-Zip: NAPLES FL 34113

Title DIRECTOR
Name VANTREES, THOMAS
Address 11622 QUIET FOREST DRIVE
City-State-Zip: TAMPA FL 33635

Title DIRECTOR
Name MCDONOUGH, CLAY
Address 2660 BRAVO V CIRCLE
City-State-Zip: PORT ORANGE FL 32128

Title DIRECTOR
Name SHAW, BARRY
Address 7036 PROCTOR ROAD
City-State-Zip: TALLAHASSEE FL 32309

Title DIRECTOR
Name ESCANIO, ALFREDO
Address 9042 NW 163 TERRACE
City-State-Zip: MIAMI LAKES FL 33018

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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: KATELYN GRIMES

ED

02/05/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WISE, RICHARD
Address 2111 ELLICOTT DRIVE
City-State-Zip: TALLAHASSEE FL 32308

Title DIRECTOR
Name PARKER, JAY
Address POST OFFICE BOX 1309
City-State-Zip: PALMETTO GA 30268

Title DIRECTOR
Name BORBOLLA, IGNACIO
Address 12 SOUTH BRIDGE LANE
City-State-Zip: KEY LARGO FL 33037

Title DIRECTOR
Name BEVIS, BREWSTER
Address 3400 DEER LANE DRIVE
City-State-Zip: TALLAHASSEE FL 32312