

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000011057

Entity Name: THE SHONDO CENTER INC**Current Principal Place of Business:**9813 PATRIOT RIDGE DRIVE
JACKSONVILLE, FL 32221**Current Mailing Address:**P.O. BOX 441361
JACKSONVILLE, FL 32222 UN**FEI Number:** 85-3229210**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VALENTINE, JEFFREY B
9813 PATRIOT RIDGE DRIVE
JACKSONVILLE, FL 32221 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P_
Name VALENTINE, JEFFREY B
Address 9813 PATRIOT RIDGE DRIVE
City-State-Zip: JACKSONVILLE FL 32221

Title VP
Name VALENTINE, REGINALD
Address 1169 EVENING SCROLL LANE
City-State-Zip: JACKSONVILLE FL 32218

Title DIR
Name SPEARMAN, LILVEGAS
Address 12327 CROSSFIELD DRIVE
City-State-Zip: JACKSONVILLE FL 32219

Title DIR
Name VALENTINE, PATRICIA
Address 9813 PATRIOT RIDGE DRIVE
City-State-Zip: JACKSONVILLE FL 32221

Title DIR
Name LIVERS, MARLON
Address 985 PARK FOREST LANE
City-State-Zip: JACKSONVILLE 32211

Title DIR
Name HAIRSTON, CEDRIC DALE
Address 1802 MATHEWS MANOR DRIVE
City-State-Zip: JACKSONVILLE 32211

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: JEFFREY B VALENTINE**PRESIDENT****02/01/2022**

Electronic Signature of Signing Officer/Director Detail

Date