

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000011302

**Entity Name:** 655 ASSOCIATES, INC.

**Current Principal Place of Business:**

422 N RIDE  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

422 N RIDE  
TALLAHASSEE, FL 32303 US

**FEI Number:** 87-2788502

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JORDAN, WILLIAM F  
422 N RIDE  
TALLAHASSEE, FL 32303 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 JORDAN, WILLIAM F  
Address 422 N RIDE  
City-State-Zip: TALLAHASSEE FL 32303

Title VP  
Name TITUS, THEODORE  
Address 1169 OLD BUMPY RD  
City-State-Zip: TALLAHASSEE FL 32317

Title SECT  
Name KESSLER, GERALD M  
Address 6628 TIM TAM TRAIL  
City-State-Zip: TALLAHASSEE FL 32309

Title TREA  
Name LUECK, WILLIAM P  
Address 7675 BUCK LAKE ROAD  
City-State-Zip: TALLAHASSEE FL 32317

Title CFO  
Name PFOST, WILLIAM B  
Address 981 PARKVIEW DRIVE  
City-State-Zip: TALLAHASSEE FL 32311

*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:** WILLIAM FREDERICK JORDAN

P

02/02/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date