

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000009249

**Entity Name:** 854 & 529 SCOUTERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1701 CEDARHILL PL  
LAKE MARY, FL 32746

**Current Mailing Address:**

320 RAVEN ROCK LN  
LONGWOOD, FL 32750 US

**FEI Number:** 88-3636161

**Certificate of Status Desired:** No

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

DOWERS, LORI  
1701 CEDARHILL PL  
LAKE MARY, FL 32746 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,D  
Name DOWERS, LORI  
Address 320 RAVEN ROCK LN  
City-State-Zip: LONGWOOD FL 32750

Title VP,D  
Name PROODIAN, JASON  
Address 320 RAVEN ROCK LN  
City-State-Zip: LONGWOOD FL 32750

Title T,D  
Name FILE, KAREN  
Address 320 RAVEN ROCK LN  
City-State-Zip: LONGWOOD FL 32750

Title S,D  
Name MARCHESE, GARY  
Address 320 RAVEN ROCK LN  
City-State-Zip: LONGWOOD FL 32750

Title D  
Name SCHARF, MICHAEL  
Address 320 RAVEN ROCK LN  
City-State-Zip: LONGWOOD FL 32750

*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: KAREN L FILE**

**TREASURER**

**03/05/2023**

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

\_\_\_\_\_  
Date