

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24889

Entity Name: WINTER SPRINGS SENIOR CENTER, INC.

FILED
Feb 26, 2019
Secretary of State
4767060452CC

Current Principal Place of Business:

400 NORTH EDGEMON AVE
% PRESIDENT
WINTER SPRINGS, FL 32708

Current Mailing Address:

400 NORTH EDGEMON AVE
% PRESIDENT
WINTER SPRINGS, FL 32708

FEI Number: 59-2952689

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HATCH, NANCY M
318 CASA GRANDE COURT
WINTER SPRINGS, FL 32708 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: NANCY M HATCH

02/26/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name HATCH, NANCY M
Address 318 CASA GRANDE CT
City-State-Zip: WINTER SPRINGS FL 32708

Title PRESIDENT
Name CASSANO, BARBARA
Address 821 SHALLOW BROOK AVE
City-State-Zip: WINTER SPRINGS FL 32708

Title DIRECTOR
Name REYNOLDS, ANITA
Address 396 N. GREGORY DR.
City-State-Zip: CASSELBERRY FL 32707

Title VP
Name RIVERA , LINDA
Address 117 N. ALDERWOOD ST.
City-State-Zip: WINTER SPRINGS FL 32708

Title DIRECTOR
Name DOYLE, PAMELA
Address 164 BRUSHCREEK DR.
City-State-Zip: SANFORD FL 32771

Title DIRECTOR
Name PAGDEN, LINDA
Address 210 E. 27TH STREET
City-State-Zip: SANFORD FL 32773

Title DIRECTOR
Name ANDRIANO, ELAINE
Address 3176 ORAVA LANE
City-State-Zip: WINTER PARK FL 32792

Title SECRETARY
Name MONIAN, SHEILA
Address 1141 EAGLES WATCH TRAIL
 % DEBBIE LAKE
City-State-Zip: WINTER SPRINGS FL 32708

Continues on page 2

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: NANCY M HATCH

TREASURER

02/26/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FABRIS, ROSE
Address 428 WINDING OAK LANE
City-State-Zip: LONGWOOD FL 32750