

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40698

Entity Name: SEMINOLE HIGH SCHOOL COMMUNITY AND STUDENT ACTION COMMITTEE, INC.

Current Principal Place of Business:

505 QUAIL DOWN DR.
DEBARY, FL 32713-4506

Current Mailing Address:

505 QUAIL DOWN DR.
DEBARY, FL 32713-4506 US

FEI Number: 59-3014412

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HIGGINS, WILLIAM M.
1340 N. ATLANTIC AVE
NEW SMYRNA BEACH, FL 32169 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 D
Name HIGGINS, WILLIAM M
Address 1340 N. ATLANTIC AVE
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title CFO
Name NOELL, PEGGY
Address 505 QUAIL DOWN DR.
City-State-Zip: DEBARY FL 32713-4506

Title OFFICER
Name TURNER, CHRISTY RUTH
Address 2342 LIONS PAW COURT
City-State-Zip: GRAND JUNCTION CO 81507

Title OFFICER
Name SPRINGFIELD, JANICE
Address 770 BANANA LAKE DR.
City-State-Zip: LAKE MARY FL 32746

Title OFFICER
Name ZAMPINI, FRANCINE
Address 1614 CHERRY BLOSSOM TERRACE
City-State-Zip: LAKE MARY FL 32746

Title OFFICER
Name PAYNE, WILLIAM
Address 1312 OLD VILLAGE RD.
City-State-Zip: TALLAHASSEE FL 32312

Title OFFICER
Name RISNER, RONALD
Address 3400 S. OCEAN BLVD
5B1
City-State-Zip: PALM BEACH FL 33480

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: PEGGY NOELL

CFO

01/26/2022

Electronic Signature of Signing Officer/Director Detail

Date