

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45244

Entity Name: GUARDIAN AD LITEM FOUNDATION OF OSCEOLA COUNTY, INC.**FILED**
Jan 03, 2024
Secretary of State
2378505092CC**Current Principal Place of Business:**3 COURTHOUSE SQUARE
C/O GUARDIAN AD LITEM PROGRAM SUITE 100
KISSIMMEE, FL 34741**Current Mailing Address:**P.O. BOX 452377
KISSIMMEE, FL 34745 US**FEI Number: 59-3093016****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LINSCOTT, WANDA
6900 RANCHERO COURT
SAINT CLOUD, FL 34771 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:** WANDA LINSCOTT**01/03/2024**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P/D
Name	LINSCOTT, WANDA
Address	6900 RANCHERO COURT
City-State-Zip:	SAINT CLOUD FL 34771

Title	SECRETARY, DIRECTOR
Name	DAVIS, JENNIFER
Address	3370 EDESEL AVE
City-State-Zip:	ST CLOUD FL 34772

Title	VP, DIRECTOR
Name	CARDENAS, ALEX
Address	3548 PIXIE LANE
City-State-Zip:	ST CLOUD FL 34772

Title	T, DIRECTOR
Name	CARDENAS , ALEX
Address	3548 PIXIE LANE
City-State-Zip:	SAINT CLOUD FL 34772

Title	DIRECTOR, PAST PRESIDENT
Name	WANDEL, KATHY
Address	1410 RIVIERA DRIVE
City-State-Zip:	KISSIMMEE FL 34744

Title	DIRECTOR
Name	VASQUEZ, SUE
Address	175 CLUB VILLAS LANE
City-State-Zip:	KISSIMMEE FL 34744

Title	DIRECTOR
Name	BONDY, JENNIFER
Address	640 FIRST CAPE CORAL DRIVE
City-State-Zip:	WINTER GARDEN FL 32803

Title	DIRECTOR
Name	BROWN, KATIE
Address	2170 FAWN MEADOW CIRCLE
City-State-Zip:	SAINT CLOUD FL 34772

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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: WANDA M LINSCOTT**PRESIDENT/DIRECTOR****01/03/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LEVAC-WHITE, AMBER
Address 3437 MIDDLEBROOK PLACE
City-State-Zip: HARMONY FL 34773

Title DIRECTOR
Name COATNEY, LESLIE
Address 2072 LULA ROAD
City-State-Zip: MINNEOLA FL 34715

Title DIRECTOR
Name ROBERTS, DEANNA
Address 186 CLUB VILLAS LANE
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name CAMPBELL, TINA
Address 500 DELAWARE AVE
City-State-Zip: SAINT CLOUD FL 34769

Title DIRECTOR
Name MCMORROW, TAWNIE
Address 3936 CHAPLAN ROAD
City-State-Zip: SAINT CLOUD FL 34772

Title DIRECTOR
Name JOHNSON, LISA
Address 2925 CLAY WHALEY
City-State-Zip: SAINT CLOUD FL 34772

Title DIRECTOR
Name JOHNSON, LOGAN
Address 2925 CLAY WHALEY ROAD
City-State-Zip: ST. CLOUD FL 34772