| SIGNATURE                 | : CATHERINE DAVEY, ESQ.                  |                 |                      | 02/24/2020 |
|---------------------------|--|-----------------|----------------------|------------|
|                           | Electronic Signature of Registered Agent |                 |                      | Date       |
| Officer/Director Detail : |  |                 |                      |            |
| Title                     | SECRETARY, DIRECTOR                      | Title           | TREASURER, DIRECTOR  |            |
| Name                      | DAVEY, CATHERINE ESQ.                    | Name            | DIMERCURIO, SEAN CPA |            |
| Address                   | 204 NORTH WYMORE RD.                     | Address         | 204 NORTH WYMORE RD. |            |
| City-State-Zip:           | WINTER PARK FL 32789                     | City-State-Zip: | WINTER PARK FL 32789 |            |
| Title                     | VC, DIRECTOR                             | Title           | DIRECTOR             |            |
| Name                      | SALAMONE, ALLISON                        | Name            | LEVINE, DIANE        |            |
| Address                   | 204 NORTH WYMORE RD.                     | Address         | 204 NORTH WYMORE RD. |            |
| City-State-Zip:           | WINTER PARK FL 32789                     | City-State-Zip: | WINTER PARK FL 32789 |            |
| Title                     | CHAIR, DIRECTOR                          | Title           | DIRECTOR             |            |
| Name                      | LAWSON, BYRON                            | Name            | RAPOLTI, RYAN        |            |
| Address                   | 204 NORTH WYMORE RD.                     | Address         | 204 NORTH WYMORE RD. |            |
| City-State-Zip:           | WINTER PARK FL 32789                     | City-State-Zip: | WINTER PARK FL 32789 |            |
| Title                     | INTERIM EXECUTIVE DIRECTOR               |                 |                      |            |
| Name                      | WILLIAMS, CYNTHIA LYNN                   |                 |                      |            |
| Address                   | 204 N. WYMORE ROAD                       |                 |                      |            |
| City-State-Zip:           | WINTER PARK FL 32789                     |                 |                      |            |
|                           |  |                 |                      |            |

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

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.

## FEI Number: 59-3124673

## Name and Address of Current Registered Agent:

DAVEY, CATHERINE ESQ. 341 N. MAITLAND AVENUE SUITE 280 MAITLAND, FL 32751 US

DOCUMENT# N48876

204 NORTH WYMORE RD. WINTER PARK, FL 32789

**Current Mailing Address:** 204 NORTH WYMORE RD. WINTER PARK, FL 32789 US

**Current Principal Place of Business:** 

Entity Name: CENTRAL FLORIDA DOWN SYNDROME ASSOCIATION, INC.

SIGNATURE: CYNTHIA WILLIAMS

above, or on an attachment with all other like empowered.

02/24/2020 INTERIM EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

## 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Certificate of Status Desired: No

FILED Feb 24, 2020 Secretary of State 4018303701CC

Date