The above named	entity submits this statement for the purpose of changing its	registered office or regis	tered agent, or both, in the State of F	lorida.
SIGNATURE	CATHERINE DAVEY, ESQ.			01/25/2022
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	VP, OFFICER	Title	TREASURER, DIRECTOR	
Name	DAVEY, CATHERINE ESQ.	Name	CULLEY, TROY	
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	CHAIRMAN, OFFICER	Title	DIRECTOR	
Name	LEVINE, DIANE	Name	QUILES, ORYZA	
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	OFFICER, SECRETARY	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	EXECUTIVE DIRECTOR	Title	DIRECTOR	
Name	BARNES, HEATHER JEAN	Name	LEWIS, PATRICIA	
Address	204 N. WYMORE ROAD	Address	204 NORTH WYMORE RD.	
City-State-Zip:	WINTER PARK FL 32789	City-State-Zip:	WINTER PARK FL 32789	
		Continues	Continues on page 2	

Name and Address of Current Registered Agent:

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

41 N. MAITLAND AVENUE

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: HEATHER BARNES

EXECUTIVE DIRECTOR 01/25/2022

Electronic Signature of Signing Officer/Director Detail

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48876

Entity Name: CENTRAL FLORIDA DOWN SYNDROME ASSOCIATION, INC.

Current Principal Place of Business:

204 NORTH WYMORE RD. WINTER PARK, FL 32789

Current Mailing Address:

204 NORTH WYMORE RD. WINTER PARK, FL 32789 US

FEI Number: 59-3124673

Jan 25, 2022 Secretary of State 7954461114CC

FILED

Certificate of Status Desired: Yes

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	TRAVIS, SEAN	Name	GOODMAN, JEFF
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	DIRECTOR
Name	SULTAN, ZAK
Address	204 NORTH WYMORE RD.
City-State-Zip:	WINTER PARK FL 32789