SIGNATURE:	CATHERINE DAVEY, ESQ.			03/24/2023
	Electronic Signature of Registered Agent			Date
Officer/Direct	tor 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	OFFICER, SECRETARY	
lame	LEVINE, DIANE	Name	LAWSON, BYRON	
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	Title	EXECUTIVE DIRECTOR	
Name	RAPOLTI, RYAN	Name	BARNES, HEATHER JEAN	
Address	204 NORTH WYMORE RD.	Address	204 N. WYMORE ROAD	
City-State-Zip:	WINTER PARK FL 32789	City-State-Zip:	WINTER PARK FL 32789	
Fitle	DIRECTOR	Title	DIRECTOR	
Name	LEWIS, PATRICIA	Name	TRAVIS, SEAN	
Address	204 NORTH WYMORE RD.	Address	204 NORTH WYMORE RD.	
City-State-Zip:	WINTER PARK FL 32789	City-State-Zip:	WINTER PARK FL 32789	

Name and Address of Current Registered Agent:

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

IN MAILLAND AVENUE IE 280 ILAND EL 32751 LIS

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: HEATHER BARNES

EXECUTIVE DIRECTOR 03/24/2023

Electronic Signature of Signing Officer/Director Detail

2023 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

FILED Mar 24, 2023 Secretary of State 1269675469CC

Certificate of Status Desired: Yes

Date

Officer/Director Detail Continued :

Title	DIRECTOR	Title	SECRETARY
Name	GOODMAN, JEFF	Name	SULTAN, ZAK
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	MEMBER	Title	MEMBER
Title Name	MEMBER MCWHORTER, CATHERINE	Title Name	MEMBER STROMBECK, BEN
Name	MCWHORTER, CATHERINE	Name	STROMBECK, BEN