## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002574

Entity Name: FLORIDA DIVISION OF THE INTERNATIONAL ASSOCIATION

FOR IDENTIFICATION INC.

**Current Principal Place of Business:** 

4444 WORTHINGTON CIRCLE PALM HARBOR, FL 34685-1158

**Current Mailing Address:** 

4444 WORTHINGTON CIRCLE PALM HARBOR, FL 34685-1158 US

FEI Number: 65-0434452 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHADE, WILLIAM H JR. 4444 WORTHINGTON CIRCLE PALM HARBOR, FL 34685-1158 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: WILLIAM H. SCHADE JR. 01/06/2024

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHAIRMAN Title DIRECTOR

Name BRYANT, TERESA Name ODEN, LACEY

Address 41 PHILLIPS STREET Address 1700 W. LEONARD STREET

City-State-Zip: BARNWELL SC 29812 City-State-Zip: PENSACOLA FL 32501

Title DIRECTOR Title DIRECTOR

NameWHITE, HEATHERNameMATTHEWS, CANDACEAddress100 ESLINGER WAYAddress6010 CATTLERIDGE BLVDCity-State-Zip:SANFORD FL 32773City-State-Zip:SARASOTA FL 34233

TitleDIRECTORTitleDIRECTORNameHICKEY, REBECCANameTURNER, BRIANAddress800 SE MONTEREY ROADAddress201 SE 6 STREET ROOM 1799

City-State-Zip: STUART FL 34994 City-State-Zip: FT. LAUDERDALE FL 33301

Title DIRECTOR Title DIRECTOR

Name BUCKNER-BRAGER, KASEY Name STRINGHAM, LAWRENCE

Address PO BOX 150027 Address 3800 SW 3RD AVE

City-State-Zip: CAPE CORAL FL 33907 City-State-Zip: CAPE CORAL FL 33914

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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: WILLIAM SCHADE

Electronic Signature of Signing Officer/Director Detail

SECRETARY/TREASURER 01/06/2024

FILED Jan 06, 2024

Secretary of State

0522856861CC

Date

## Officer/Director Detail Continued:

Title SECRETARY Title DIRECTOR

NameSCHADE, WILLIAM H. JR.NameKAMMERER, JAMESAddress4444 WORTHINGTON CIRCLEAddress1728 HCKORY COVECity-State-Zip:PALM HARBOR FL 34685-1158City-State-Zip:COOKEVILLE TN 38506