

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003505

Entity Name: CHILDCARE RESOURCES OF INDIAN RIVER, INC.**Current Principal Place of Business:**2300 5TH AVE
SUITE 149
VERO BEACH, FL 32960**Current Mailing Address:**2300 5TH AVE
SUITE 149
VERO BEACH, FL 32960 US**FEI Number:** 65-0523165**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MCGUIRE BOWMAN, SHANNON
2300 5TH AVENUE
SUITE 149
VERO BEACH, FL 32960 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:** SHANNON MCGUIRE BOWMAN

02/13/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title ED
Name MCGUIRE BOWMAN, SHANNON
Address 626 34TH TERRACE
City-State-Zip: VERO BEACH FL 32968

Title OFFICER
Name DONOVAN, SUSAN
Address 6196 57TH COURT
City-State-Zip: VERO BEACH FL 32967

Title OFFICER
Name HORTON, BARBARA
Address 201 SANDPIPER POINTE
City-State-Zip: VERO BEACH FL 32963

Title OFFICER
Name BIENDORF, JIM
Address 4259 DIAMOND SQUARE
City-State-Zip: VERO BEACH FL 32967

Title OFFICER
Name JOHNSON, HELEN BOEHM DR.
Address 1321 SEAHAWK LANE
City-State-Zip: VERO BEACH FL 32963

Title OFFICER
Name PESHKE, JENNIFER
Address 4727 HIGHWAY A1A
City-State-Zip: VERO BEACH FL 32963

Title PRESIDENT
Name SORZANO, TRACEY
Address 3001 OCEAN DRIVE
SUITE 301
City-State-Zip: VERO BEACH FL 32963

Title TREASURER
Name THURN, KYLE
Address 360 40TH CT, SW
City-State-Zip: VERO BEACH FL 32968

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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: TRACEY SORZANO

PRESIDENT

02/13/2025

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name BROWN, MARY SUE
Address 970 SANDFLY LANE
City-State-Zip: VERO BEACH FL 32963

Title SECRETARY
Name HAMMARSKJOLD, CHRISTINE
Address 10010 RENFREW AVE
City-State-Zip: VERO BEACH FL 32963

Title OFFICER
Name LUNCEFORD, CASEY
Address 4340 12TH LANE
City-State-Zip: VERO BEACH FL 32966

Title OFFICER
Name KNURR, MEGAN
Address 2300 5TH AVE STE 149
City-State-Zip: VERO BEACH FL 32960

Title OFFICER
Name KENNEDY, T P
Address 3906 SABAL PALM DR.
City-State-Zip: VERO BEACH FL 32963

Title OFFICER
Name SMITH, GERALDINE
Address 1305 W. ISLAND CLUB SQ.
City-State-Zip: VERO BEACH FL 32963

Title OFFICER
Name GRIFFIS, DAVID
Address 616 34TH TERRACE
City-State-Zip: VERO BEACH FL 32968

Title OFFICER
Name MCCAIN, MATTHEW
Address 1826 14TH AVE.
City-State-Zip: VERO BEACH FL 32960

Title OFFICER
Name EDWARDS, SHALA
Address 2300 5TH AVE STE 149
City-State-Zip: VERO BEACH FL 32960

Title OFFICER
Name BAYSURA, KELLY
Address 1025 CLIPPER ROAD
City-State-Zip: VERO BEACH FL 32963

Title OFFICER
Name SHINE, MELISSA
Address 965 TREASURE LANE
City-State-Zip: VERO BEACH FL 32963