2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 04, 2021
Secretary of State
9426055983CC

DOCUMENT# N95000003986

Entity Name: THE FRIENDS OF SANDOWAY HOUSE NATURE CENTER, INC.

Current Principal Place of Business:

142 S. OCEAN BLVD.
DELRAY BEACH, FL 33483

Current Mailing Address:

142 S. OCEAN BLVD.
DELRAY BEACH, FL 33483 US

FEI Number: 65-0603775

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROBINSON, JOE
503 OLEANDER LN.
DELRAY BEACH, FL 33483 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: JOE ROBINSON 02/04/2021

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	ASSISTANT TREASURER, DIRECTOR
Name	HEILAKKA, ANN
Address	4457 N. OCEAN BLVD. APT. 105
City-State-Zip:	DELRAY BEACH FL 33483

Title	VP
Name	RUSSO, SUSAN
Address	6080 VIA VENETIA S.
City-State-Zip:	DELRAY BEACH FL 33484

Title	DIRECTOR
Name	BARRETTE, KELLY
Address	1201 SEASPRAY AVE.
City-State-Zip:	DELRAY BEACH FL 33483

Title	PRESIDENT
Name	RIDLEY, ALEX
Address	1216 SEASPRAY AVE.
City-State-Zip:	DELRAY BEACH FL 33483

Title	TREASURER, DIRECTOR
Name	ROBINSON, JOE
Address	503 OLEANDER LN.
City-State-Zip:	DELRAY BEACH FL 33483

Title	DIRECTOR
Name	BOUGHTON, JESTENA
Address	525 E. ATLANTIC AVE.
City-State-Zip:	DELRAY BEACH FL 33483

Title	DIRECTOR
Name	CLARK, GAYLE
Address	124 NE 7TH AVE.
City-State-Zip:	DELRAY BEACH FL 33483

Title	SECRETARY
Name	WHITE, LISA
Address	3122 N. OCEAN BLVD.
City-State-Zip:	GULFSTREAM FL 33483

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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: SUSAN RUSSO VP 02/04/2021

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	VERA, RODRIGO
Address	310 NW 18TH ST.
City-State-Zip:	DELRAY BEACH FL 33444

Title	DIRECTOR
Name	ROY, TERRY
Address	329 ANDREWS AVE.
City-State-Zip:	DELRAY BEACH FL 33483

Title	DIRECTOR
Name	CONDON, KATE
Address	12 BANYAN RD.
City-State-Zip:	GULF STREAM FL 33483

Title	DIRECTOR
Name	HENDERSON, ANNE
Address	2994 NEEDHAM CT.
City-State-Zip:	DELRAY BEACH FL 33445

Title	DIRECTOR
Name	WALDEN, RANDI
Address	828 NE 1ST CT.
City-State-Zip:	DELRAY BEACH FL 33483