

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N97000007198

**Entity Name:** NORTH FLORIDA SLIDERS, INC.

**Current Principal Place of Business:**

446 SW DAVENPORT GLEN  
LAKE CITY, FL 32024

**Current Mailing Address:**

P O BOX 1634  
LAKE CITY, FL 32056 US

**FEI Number:** 59-3446403

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

TYRE, DOROTHY H  
446 SW DAVENPORT GLEN  
LAKE CITY, FL 32024 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:** DOROTHY H TYRE

04/21/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TD  
Name TYRE, DOROTHY H  
Address P O BOX 1634  
City-State-Zip: LAKE CITY FL 32056

Title D  
Name WEST, JOHN  
Address 924 N.W. 35TH AVE.  
City-State-Zip: GAINESVILLE FL 32609

Title SD  
Name KENT, THOMAS  
Address 6015 N.W. 83RD TERRACE  
City-State-Zip: GAINESVILLE FL 32653

Title VP  
Name MASTERS, VERNON  
Address 4295 SW BIRLEY AVE  
City-State-Zip: LAKE CITY FL 32024

*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:** DOROTHY H TYRE

**DIRECTOR**

04/21/2023

Electronic Signature of Signing Officer/Director Detail

Date