

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000004182

**FILED**  
**Jan 22, 2018**  
**Secretary of State**  
**CC3704217716**

**Entity Name:** COMMUNITY FOUNDATION OF EAST CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

25 PINE VALLEY CIRCLE  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

25 PINE VALLEY CIRCLE  
ORMOND BEACH, FL 32174 US

**FEI Number:** 59-3663309

**Certificate of Status Desired:** No

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

SEEBER, BRIAN R  
6 SLOW STREAM WAY  
ORMOND BEACH, FL 32174 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:** BRIAN R SEEBER

01/22/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CHAIRMAN, DIRECTOR  
Name BROOKS-THOMPSON, LISA  
Address 129 HAGGLE DR  
City-State-Zip: DAYTONA BEACH FL 32124

Title PRESIDENT, DIRECTOR  
Name ANTHONY, JOHN T  
Address 25 PINE VALLEY CIRCLE  
City-State-Zip: ORMOND BEACH FL 32174

Title VP, TREASURER, DIRECTOR  
Name SEEBER, BRIAN R  
Address 6 SLOW STREAM WAY  
City-State-Zip: ORMOND BEACH FL 32174

Title SECRETARY, DIRECTOR  
Name WILARY, LORETTA A  
Address 1164 SABLE KEY CIRCLE  
City-State-Zip: PORT ORANGE FL 32128

Title DIRECTOR  
Name WANDELT, GARY E  
Address 542 MYRTLE PLACE  
City-State-Zip: SOUTH DAYTONA FL 32119

Title DIRECTOR  
Name CLARKE, VICTORIA T  
Address P.O. BOX 730224  
City-State-Zip: ORMOND BEACH FL 32173

Title DIRECTOR EMERITUS  
Name SCHMELICK, NITA  
Address 253 HAZELTINE DRIVE  
City-State-Zip: DEBARY FL 32713

*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:** BRIAN R SEEBER

VP/TREAS

01/22/2018

Electronic Signature of Signing Officer/Director Detail

Date