## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002820

Entity Name: I.C.A.N., INC.

**Current Principal Place of Business:** 

889 SE CALL DRIVE LEE. FL 32059

**Current Mailing Address:** 

P O BOX 302

MADISON, FL 32341 US

FEI Number: 06-1688062 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLOWERS, RETIS 889 SE CALL DRIVE LEE, FL 32059 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:

Electronic Signature of Registered Agent

Date

**FILED** Mar 21, 2023

**Secretary of State** 

4496932627CC

Officer/Director Detail:

Title **PRESIDENT** Title BENEVOLENCE DIRECTOR

HALLEY, MICHAEL Name GASTON, LINDA Name

Address 356 N WASHINGTON AVE Address 818 NW HAMBURG RD

City-State-Zip: MADISON FL 32340 MADISON FL 32340 City-State-Zip:

Title **TREASURER** Title **SECRETARY** Name FLOWERS, RETIS BROWN, DEBORAH Name 889 SE CALL DRIVE Address Address 135 NE DILL ST LEE FL 32059 City-State-Zip: MADISON FL 32340 City-State-Zip:

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.

03/21/2023 SIGNATURE: LINDA GASTON **TREASURER**