

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702090

Entity Name: MCCREA FOUNDATION, INC.**Current Principal Place of Business:**C/O DAVID MCCREA
1940 WILLOW BEND CIRCLE 102
NAPLES, FL 34109**Current Mailing Address:**C/O DAVID MCCREA
1940 WILLOW BEND CIRCLE 102
NAPLES, FL 34109 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCCREA, DAVID
1940 WILLOW BEND CIRCLE
102
NAPLES, FL 34109 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**Officer/Director Detail :**Title PD
Name MCCREA, DAVID
Address 1940 WILLOW BEND CIRCLE
102
City-State-Zip: NAPLES FL 34109Title SD
Name MCCREA, JANET
Address 1940 WILLOW BEND CIRCLE
102
City-State-Zip: NAPLES FL 34109Title D
Name STRUB, ASHLEY
Address 297 BOUNDARY BAY ROAD
City-State-Zip: POINT ROBERTS WA 98281Title D
Name MCCREA, JESSICA
Address 817 WEST LACROSSE AVE.
City-State-Zip: COUER D'ALENE ID 83814

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: DAVID MCCREA**PRESIDENT****02/21/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date