#### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 735636** 

Entity Name: DRUG FREE AMERICA FOUNDATION, INC.

**FILED** Mar 02, 2017 **Secretary of State** CC8434822880

# **Current Principal Place of Business:**

5999 CENTRAL AVENUE

STE 301

SAINT PETERSBURG, FL 33710

### **Current Mailing Address:**

5999 CENTRAL AVENUE

STE 301

SAINT PETERSBURG, FL 33710

FEI Number: 59-1662427 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

FAY, CALVINA ED 5999 CENTRAL AVE

STE 301

SAINT PETERSBURG, FL 33710 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 **CHAIR** Title DIRECTOR

Name HOLTON, JAMES W ESQ. Name SULLIVAN, IRENE H JUDGE (RET.)

5999 CENTRAL AVENUE Address Address 5999 CENTRAL AVENUE

> STE 301 STE 301

City-State-Zip: SAINT PETERSBURG FL 33710 City-State-Zip: SAINT PETERSBURG FL 33710

Title **DIRECTOR** Title LC

Name SEMBLER, BETTY Name BAILIE, JEREMY D ESQ

Address 5999 CENTRAL AVE, STE 301 Address 5999 CENTRAL AVENUE STE 301

City-State-Zip: SAINT PETERSBURG FL 33710

City-State-Zip: SAINT PETERSBURG FL 33710

Title **DIRECTOR** 

PRESIDENT, VC KAUFFMAN, KEVIN P Name SCHMIDT, MICHAEL W Name 5999 CENTRAL AVENUE Address

5999 CENTRAL AVENUE Address **STE 301** 

Title

Name

STE 301 SAINT PETERSBURG FL 33710

City-State-Zip: City-State-Zip: SAINT PETERSBURG FL 33710

Title **TREASURER** 

City-State-Zip:

Title DIRECTOR Name REILLY, MARY ANNE

Address 5999 CENTRAL AVENUE Address 5999 CENTRAL AVENUE STE 301

STE 301

SAINT PETERSBURG FL 33710

SAINT PETERSBURG FL 33710 City-State-Zip:

**BROOKS, RONALD** 

### Continues on page 2

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: JAMES W. HOLTON, ESQ **CHAIR** 03/02/2017

## Officer/Director Detail Continued:

Title DIRECTOR Title SECRETARY

Name GOLDSTEIN, HERBERT PHD, ABPP Name POWERS-LATVALA, SUSAN

Address 5999 CENTRAL AVENUE

STE 301

STE 301

City-State-Zip: SAINT PETERSBURG FL 33710 City-State-Zip: SAINT PETERSBURG FL 33710

Title DIRECTOR Title DIRECTOR

Name JOLLY, LAURA Name GROGER, GREG ESQ.

Address 5999 CENTRAL AVENUE Address 5999 CENTRAL AVENUE

STE 301

Address

5999 CENTRAL AVENUE

STE 301

City-State-Zip: SAINT PETERSBURG FL 33710 City-State-Zip: SAINT PETERSBURG FL 33710