2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 17, 2025
Secretary of State
3448858648CC

DOCUMENT# 740702

Entity Name: ESCAMBIA COUNTY SICKLE CELL FOUNDATION, INC.

Current Principal Place of Business:

321 N DEVILLIRES ST SUITE 219
PENSACOLA, FL 32501

Current Mailing Address:

321 N DEVILLIRES ST SUITE 219
P. O. BOX 9132
PENSACOLA, FL 32513 US

FEI Number: 59-1780377

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALLACE, WALTER JAMES SR.
709 WOODLAND DR.
PENSACOLA, FL 32503 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: WALTER JAMES WALLACE,SR 09/17/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT
Name	WALLACE, WALTER J
Address	709 WOODLAND DR
City-State-Zip:	PENSACOLA FL 32503

Title	VP
Name	KYLE, JOESPH
Address	P.O. BOX 9031
City-State-Zip:	PENSACOLA FL 32513

Title	SECT
Name	SMITH, GEORGETTA
Address	517 W. STRONG ST
City-State-Zip:	PENSACOLA FL 32501

Title	TD
Name	GREEN, LINDA
Address	2200 BLUE LAKE DRIVE
City-State-Zip:	PENSACOLA FL 32506

Title	MD
Name	GRIER, PAMELA M
Address	1682 CEDRUS LANE
City-State-Zip:	PENSACOLA FL 32514

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: WALTER WALLACE PRESIDENT 09/17/2025

Electronic Signature of Signing Officer/Director Detail — Date