

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 748181

**Entity Name:** SAFESPACE, INC.

**Current Principal Place of Business:**

612 SE DIXIE HIGHWAY  
STUART, FL 34994

**Current Mailing Address:**

612 SE DIXIE HIGHWAY  
STUART, FL 34994 US

**FEI Number:** 59-1983994

**Certificate of Status Desired:** No

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

ALBIZU, TERESA CEO  
612 SE DIXIE HIGHWAY  
STUART, FL 34994 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:** TERESA ALBIZU, PHD

01/26/2022

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PAST PRESIDENT  
Name PAGE, JOYCE  
Address 660 NE OCEAN BLVD  
City-State-Zip: STUART FL 34996

Title PRESIDENT  
Name WONG, NANCY  
Address 465 SW PERTH PLACE  
City-State-Zip: PALM CITY FL 34990

Title TREASURER  
Name GOODNER, ADAM  
Address 4700 W MIDWAY ROAD  
City-State-Zip: FORT PIERCE FL 34981

Title PRESIDENT, ELECT  
Name COOPER, AIMEE  
Address 4055 41ST AVENUE  
City-State-Zip: VERO BEACH FL 32960

Title SECRETARY  
Name HENGERER, LINDA  
Address PO BOX 96  
City-State-Zip: VERO BEACH FL 32961

Title DIRECTOR OF FINANCE  
Name PIEKARA, PROVIDENCE  
Address 429 NW COOL WATER COURT  
City-State-Zip: PORT ST LUCIE FL 34986

*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:** PROVIDENCE PIEKARA

**DIRECTOR OF FINANCE**

01/26/2022

Electronic Signature of Signing Officer/Director Detail

Date