

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 756892

Entity Name: LOST TREE VILLAGE CHARITABLE FOUNDATION, INC.**Current Principal Place of Business:**8 CHURCH LANE
NORTH PALM BEACH, FL 33408**Current Mailing Address:**8 CHURCH LANE
NORTH PALM BEACH, FL 33408 US**FEI Number:** 59-2104920**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VUKUSICH, JILLIAN C
8 CHURCH LANE
NORTH PALM BEACH, FL 33408 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:** JILLIAN VUKUSICH

03/03/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXECUTIVE DIRECTOR
Name VUKUSICH, JILLIAN C
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP
Name CONATY, WILLIAM J
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP
Name CHACE, ELIZABETH
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408

Title PRESIDENT
Name COLLINS, ATWOOD
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP, SECRETARY
Name CLEVELAND, THOMAS
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP
Name MIKKELSEN, TINA
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP
Name ROGERS, SCOTT
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408

Title TREASURER
Name TWYMAN, JOHN
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408

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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: JILLIAN VUKUSICH

EXECUTIVE DIRECTOR

03/03/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name ROTCHFORD, CARROLL
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408

Title VP
Name SHAW, IRENE
Address 8 CHURCH LANE
City-State-Zip: NORTH PALM BEACH FL 33408