Electronic Signature of Signing Officer/Director Detail

#### 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0300000312

Entity Name: FLORIDA PHILANTHROPIC NETWORK, INC.

# Current Principal Place of Business:

12157 W LINEBAUGH AVE SUITE #626 TAMPA, FL 33626

### **Current Mailing Address:**

12157 W. LINEBAUGH AVE, SUITE #384 SUITE #626 TAMPA, FL 33626 US

### FEI Number: 20-1328734

### Name and Address of Current Registered Agent:

DIETZ, ASHLEY 12157 W LINEBAUGH AVE SUITE 655 SUITE #626 TAMPA, FL 33626 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	ASHLEY DIETZ			02/22/2024			
	Electronic Signature of Registered Agent			Date			
Officer/Director Detail :							
Title	PCEO	Title	DIRECTOR				
Name	DIETZ, ASHLEY	Name	GINDLING, JOHNETTE				
Address	12157 W LINEBAUGH AVE SUITE #384	Address	1100 ROCKLEDGE BLVD. SUITE #100				
City-State-Zip:	TAMPA FL 33626	City-State-Zip:	MELBOURNE FL 32955				
Title	TREASURER	Title	DIRECTOR				
Name	CROMWELL, TIM	Name	SACERDOTE, GRACE				
Address	4800 DEERWOOD CAMPUS PARKWAY	Address	245 RIVERSIDE AVE. SUITE 310				
	DC3-4	City-State-Zip:	JACKSONVILLE FL 32202				
City-State-Zip:	JACKSONVILLE FL 32246						
Title	CHAIRMAN	Title	DIRECTOR				
		Name	GRIMISON, THERESA				
Name	HOUSTON, DARYL	Address	1361 BEDFORD DRIVE				
Address	700 SOUTH DIXIE HIGHWAY SUITE 200		SUITE 102				
City-State-Zip:		City-State-Zip:	MELBOURNE FL 32940				
		Title	DIRECTOR				
Title	DIRECTOR	Name	CHASE, ALLISON				
Name	BAIER, STACY	Address	1709 HERMITAGE BLVD				
Address	12090 STARKEY RD						
City-State-Zip:	LARGO FL 33773	City-State-Zip:	TALLAHASSEE FL 32308				
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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: ASHLEY DIETZ

PRESIDENT AND CEO 02/22/2024

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FILED Feb 22, 2024 Secretary of State 2827636449CC

Certificate of Status Desired: No

Date

#### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR	
Name	ROSHELL, RINKINS	Name	JAMIE, KAHNS	
Address	2850 TIGERTAIL AVE 600	Address	12157 W. LINEBAUGH AVE, SUITE #384	
City-State-Zip:	MIAMI FL 33133		SUITE #626	
		City-State-Zip:	TAMPA FL 33626	