2023 FLOR	FILED							
DOCUMENT# N0300006699 Feb 08, 2023								
Entity Name	Entity Name: THE ALVAH H. AND WYLINE P. CHAPMAN FOUNDATION, INC.							
Current Principal Place of Business: 4842612288CC 555 52ND TER N ST. PETERSBURG, FL 33703-2934								
Current Mailing Address:								
P.O. BOX 55398 ST PETERSBURG, FL 33732 US								
FEI Number	FEI Number: 58-6069146 Certificate of Status Desired: No							
Name and Address of Current Registered Agent:								
HILTON, SCOTT 555 52ND TER N ST. PETERSBURG, FL 33703-2934 US								
The above named	entity submits this statement for the purpose of changing its regist	ered office or regist	ered agent, or both,	in the State of Florida.				
SIGNATURE: SCOTT HILTON								
	Electronic Signature of Registered Agent			Date				
Officer/Director Detail :								
Title	D	Title	D					
Name	HILTON, ROBERT	Name	SAYLER, ALAN	P				
Address	555 52ND TER N	Address	1909 TANGLEW	OOD DR. NE				
City-State-Zip:	ST. PETERSBURG FL 33703-2934	City-State-Zip:	ST. PETERSBUI	RG FL 33702				
Title	D	Title	D					
Name	SAYLER, LEE B	Name	SAYLER, VAN C	:				
Address	323 RIVER DRIVE	Address	555 5TH AVE N	E, STE 711				

Address	525 RIVER DRIVE	, 144,000	
City-State-Zip:	TEQUESTA FL 33469	City-State-Zip:	ST. PETERSBURG FL 33701
Title	D	Title	DIRECTOR
Name	WEBB, AUBREY Q	Name	FIGUERAS, KRISTY
Address	55 MERRICK WAY, SUITE 212	Address	9116 SW 113TH PLACE CIRCLE EAST
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	MIAMI FL 33176
Title	DIRECTOR	Title	DIRECTOR
Name	BECKWITH, PAGE	Name	HILTON, SCOTT
Address	1020 ALLEN RD	Address	5455 AMBERFILED DR
City-State-Zip:	GRANTVILLE GA 30220	City-State-Zip:	PEACHTREE CORNERS GA 30092

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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: SCOTT HILTON

CHAIR

02/08/2023 Date

Electronic Signature of Signing Officer/Director Detail

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	HILTON, DAVID	Name	SAYLER, STEPHEN
Address	3321 GLACIER RIDGE RD	Address	11024 FARRAGUT HILLS BLVD
City-State-Zip:	MIDDLETON WI 53562	City-State-Zip:	KNOXVILLE TN 37934-4031