

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000008648

**FILED**  
**Feb 12, 2015**  
**Secretary of State**  
**CC7485641485**

**Entity Name:** THE REAL ROSEWOOD FOUNDATION, INC.

**Current Principal Place of Business:**

14738 SW 159TH AVE  
ARCHER, FL 32618

**Current Mailing Address:**

PO BOX 252  
ARCHER, FL 32618 US

**FEI Number: 42-1607804**

**Certificate of Status Desired: No**

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

JENKINS, LIZZIE PRB  
17904 SW 183RD AVE  
ARCHER, FL 32618-5084 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D  
Name JENKINS, LIZZIE PRB  
Address P O BOX 252  
City-State-Zip: ARCHER FL 32618

Title O  
Name CLARK, IRABELL  
Address P.O. BOX 52  
City-State-Zip: ARCHER FL 32618

Title O  
Name WITHERSPOON, AVON  
Address P.O. BOX 140686  
City-State-Zip: GAINESVILLE FL 32614

Title O  
Name JENKINS, JOHN M SR  
Address P.O. BOX 252  
City-State-Zip: ARCHER FL 32618

*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: LIZZIE PRB JENKINS**

**PRESIDENT**

**02/12/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date