2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002007

Entity Name: THE DAVID MAUS FOUNDATION, INC.

Current Principal Place of Business:

3939 US HWY 19

NEW PORT RICHEY, FL 34652

Current Mailing Address:

3939 US HWY 19

NEW PORT RICHEY, FL 34652 US

FEI Number: 20-2802845 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORNSTEIN, MARK L 2 SOUTH ORANGE AVENUE 5TH FLOOR ORLANDO, FL 32801 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

FILED Apr 21, 2016

Secretary of State

CC0086221651

Officer/Director Detail:

Title D Title D

Name MAUS, DAVID Name ORNSTEIN, MARK L

Address 3939 US HWY 19 Address 2 SOUTH ORANGE AVENUE 5TH

FLOOR

City-State-Zip: NEW PORT RICHEY FL 34652

City-State-Zip: ORLANDO FL 32801

Title D

Name

Title
BUCK, TOM ...

Address 3939 US HWY 19 Address 3939 US HWY 19 Address 3939 US HWY 19

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

Title D Title D

 Name
 FIFITA, TONGA
 Name
 MAUS, NICOLE

 Address
 3939 US HWY 19
 Address
 3939 US HWY 19

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

Title D Title D

 Name
 MCCUMBER, JULIE
 Name
 PEEL, MARY

 Address
 3939 US HWY 19
 Address
 3939 US HWY 19

City-State-Zip: NEW PORT RICHEY FL 34652 City-State-Zip: NEW PORT RICHEY FL 34652

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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: DAVID MAUS DIRECTOR 04/21/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title D

Name STRAWN, REBECCA

Address 3939 US HWY 19

City-State-Zip: NEW PORT RICHEY FL 34652

Title D

Name MARION, FRED Address 3939 US HWY 19

City-State-Zip: NEW PORT RICHEY FL 34652

Title D

Name SIERPUTOWSKI, CHIP

Address 3939 US HWY 19

City-State-Zip: NEW PORT RICHEY FL 34652