

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000004034

**FILED**  
**Feb 08, 2021**  
**Secretary of State**  
**3839911685CC**

**Entity Name:** FLORIDA INTRODUCES PHYSICAL ACTIVITY AND NUTRITION TO YOUTH INCORPORATED

**Current Principal Place of Business:**

2860 W STATE ROAD 84 SUITE 103  
DANIA BEACH, FL 33312

**Current Mailing Address:**

2860 W STATE ROAD 84 SUITE 103  
DANIA BEACH, FL 33312 US

**FEI Number: 87-0743538**

**Certificate of Status Desired: No**

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

KUNINS, LYNNE E  
2860 W STATE ROAD 84 SUITE 103  
DANIA BEACH, FL 33312 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            CEO  
Name            KUNINS, LYNNE E  
Address        2860 W STATE ROAD 84 SUITE 103  
City-State-Zip: DANIA BEACH FL 33312

Title            DIRECTOR  
Name            ELVIR, ANA  
Address        2860 W STATE ROAD 84 SUITE 103  
City-State-Zip: DANIA BEACH FL 33312

Title            DIRECTOR  
Name            STROHMEYER, KURT  
Address        2860 W STATE ROAD 84 SUITE 103  
City-State-Zip: DANIA BEACH FL 33312

Title            CHAIR  
Name            LUDWIG, KATHY  
Address        2860 W STATE ROAD 84 SUITE 103  
City-State-Zip: DANIA BEACH FL 33312

Title            TREASURER  
Name            MULLIN, JOHN  
Address        2860 W STATE ROAD 84 SUITE 103  
City-State-Zip: DANIA BEACH FL 33312

Title            DIRECTOR  
Name            MILLOVAN, MORGAN  
Address        2860 W STATE ROAD 84 SUITE 103  
City-State-Zip: DANIA BEACH FL 33312

*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: LYNNE KUNINS**

**CEO**

**02/08/2021**

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

\_\_\_\_\_  
Date