

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007401

Entity Name: INDEPENDENCE WORKS, INC.

Current Principal Place of Business:

2247 PALM BEACH LAKES BLVD.,
SUITE 102
WEST PALM BEACH, FL 33409

Current Mailing Address:

2247 PALM BEACH LAKES BLVD.,
SUITE 102
WEST PALM BEACH, FL 33409 US

FEI Number: 20-3383117

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABEL, SUSAN
2247 PALM BEACH LAKES BLVD
SUITE 102
WEST PALM BEACH, FL 33409 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: SUSAN ABEL

04/26/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN, DIRECTOR
Name LEDDY, JOSEPH CSR.
Address 3900 NORTH OCEAN DRIVE
16C
City-State-Zip: LAUDERDALE BY THE SEA FL 33308

Title DIRECTOR
Name GARRICK, SEAN
Address 1655 BRANDYWINE RD #8112
City-State-Zip: WEST PALM BEACH FL 33409

Title TREASURER, SECRETARY
Name WOOD, STEPHEN A
Address 114 LOCUST ST
City-State-Zip: DOVER NH 03820

Title DIRECTOR
Name MALONEY, JOHNNY
Address 1110 MYRTLE WOODS EAST CIRCLE
City-State-Zip: PALM BEACH GARDENS FL 33418

Title DIRECTOR
Name CERRA, GLORIA JEAN
Address 2880 NE 14TH ST CSWY
City-State-Zip: POMPANO BEACH FL 33062

Title PRESIDENT, DIRECTOR
Name MOUNTAIN, RYAN
Address 53 STEPPING STONE ROAD
City-State-Zip: LEE NH 03824

Title DIRECTOR
Name CONDON, MAUREEN
Address P.O. BOX 4401
City-State-Zip: JUPITER FL 33469

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: STEPHEN A WOOD

**TREASURER AND
SECRETARY**

04/26/2022

Electronic Signature of Signing Officer/Director Detail

Date