# 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000012028

Entity Name: EMPOWERMENT FOUNDATION, INC.

FILED Nov 07, 2016 Secretary of State CC8163811056

## **Current Principal Place of Business:**

812 SWEETWATER CLUB BLVD LONGWOOD, FL 32779

# **Current Mailing Address:**

P.O. BOX 915115 LONGWOOD, FL 32791

FEI Number: 20-3862640 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

ALEXANDER, FLORENCE 812 SWEETWATER CLUB BLVD. LONGWOOD, FL 32779 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 PRES Title SEC.

Name ALEXANDER, STANLEY Name ALEXANDER, FLORENCE PHD

Address P.O. BOX 915115 Address P.O. BOX 915115

City-State-Zip: LONGWOOD FL 32791 City-State-Zip: LONGWOOD FL 32791

Title TRES

Name ALEXANDER, FLORENCE DR.

Address P.O. BOX 915115

City-State-Zip: LONGWOOD FL 32791

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: DR STANLEY ALEXANDER

PRES

11/07/2016