

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003766

Entity Name: A PLUS FOUNDATION, INC.

Current Principal Place of Business:

17 CANTERBURY LANE
TAMARAC, FL 33319

Current Mailing Address:

P.O. BOX 770295
CORAL SPRINGS, FL 33077

FEI Number: 20-4647178

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

POTTS, ESSIE
18970 STEWART CIRCLE #3
BOCA RATON, FL 33496 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: ESSIE POTTS

01/06/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title BOARD MEMBER
Name ROACH, TRACY
Address 7360 52ND COURT
City-State-Zip: LAUDERHILL FL 33319

Title BOARD MEMBER
Name BROWN, LISA
Address 8224 NW 85TH AVE
City-State-Zip: TAMARAC FL 33321

Title FINANCIAL SECRETARY
Name HOLLOWAY, KHIRA
Address 237 NE 42ND COURT
City-State-Zip: POMPANO BEACH FL 33064

Title TREASURER
Name MORRISON, ANGELA
Address 4020 NW 4TH COURT
City-State-Zip: COCONUT CREEK FL 33066

Title PRESIDENT
Name MCCULLOUGH, VENETTA
Address 17 CANTERBURY LANE
City-State-Zip: TAMARAC FL 33319

Title VP
Name WAIDE, CHERYL
Address 1351 SW 125TH AVE APT 213
City-State-Zip: PEMBROKE PINES FL 33027

Title BOARD MEMBER
Name COOPER, SHERRI
Address 6504 NW 54TH COURT
City-State-Zip: LAUDERHILL FL 33319

Title BOARD MEMBER
Name ROBINSON, ANTIONECE
Address 704 SW 1ST LANE
City-State-Zip: POMPANO BEACH FL 33060

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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: VENETTA MCCULLOUGH

PRESIDENT

01/06/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SECRETARY
Name WALKER, JASMINE
Address 5730 LAKESIDE DRIVE
 409
City-State-Zip: MARGATE FL 33063