

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003766

Entity Name: A PLUS FOUNDATION, INC.

FILED
Feb 08, 2019
Secretary of State
3289586369CC

Current Principal Place of Business:

3821 ENVIRON BLVD
APT. 709
LAUDERHILL, 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:

HILTON, OLIVIA B.
3821 ENVIRON BLVD
APT. 709
LAUDERHILL, FL 33319 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: OLIVIA B. HILTON

02/08/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name FRANKLIN-WILLIAMS, MALIKH
Address P.O. BOX 770295
City-State-Zip: CORAL SPRINGS FL 33077

Title TREASURER
Name BROWN, LISA
Address P.O. BOX 770295
City-State-Zip: CORAL SPRINGS FL 33077

Title DIRECTOR
Name HUDSON, DARLENE
Address P.O. BOX 770295
City-State-Zip: CORAL SPRINGS FL 33077

Title DIRECTOR
Name LEE-BROWN, CATRICE
Address P.O. BOX 770295
City-State-Zip: CORAL SPRINGS FL 33077

Title PRESIDENT
Name WRIGHT, LUWANDO
Address P.O. BOX 770295
City-State-Zip: CORAL SPRINGS FL 33077

Title VP
Name GREENE-FOGLE, ASHLEY
Address P.O. BOX 770295
City-State-Zip: CORAL SPRINGS FL 33077

Title DIRECTOR
Name BURRELL, NICOLE
Address P.O. BOX 770295
City-State-Zip: CORAL SPRINGS FL 33077

Title DIRECTOR
Name MCCULLOUGH, VENETTA
Address P.O. BOX 770295
City-State-Zip: CORAL SPRINGS FL 33077

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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: LUWANDO L WRIGHT

PRESIDENT

02/08/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WADE, CHERYL
Address P.O. BOX 770295
City-State-Zip: CORAL SPRINGS FL 33077