

**2020 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N06000005800

**Entity Name:** WE ONE, INC.

**Current Principal Place of Business:**

309 EVERGLADE AVE.  
PALM BEACH, FL 33480

**Current Mailing Address:**

309 EVERGLADE AVE.  
PALM BEACH, FL 33480 US

**FEI Number:** 26-4472846

**Certificate of Status Desired:** No

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

SOKMENSUER, KENT H  
309 EVERGLADE AVE.  
PALM BEACH, FL 33480 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 CHAIRMAN, TREASURER, FOUNDER  
Name SOKMENSUER, KENT H  
Address 309 EVERGLADE AVE.  
City-State-Zip: PALM BEACH FL 33480

Title DIRECTOR (COMMUNITY OUTREACH)  
Name JOLSON, MICHAEL  
Address 114 SEASIDE ST.  
City-State-Zip: SANTA CRUZ CA 95060

Title ELDER, MASTER OF KINDNESS  
Name CARIERE, PHILIP M  
Address 736 CEDAR PLACE  
City-State-Zip: VENTURA FL 93001

Title VICE CAIRMAN (SUCCESSOR AS LEGAL "SOLE MEMBER")  
Name EVANS, KELLY  
Address 603 WASHINGTON ST.  
City-State-Zip: SANTA CRUZ CA 95060

Title SECRETARY, BODDHISATTVA OF PURE VIEW  
Name BRODLEY, DOUGLAS  
Address 411 S. SANGAMON ST.  
APT.3D  
City-State-Zip: CHICAGO IL 60607

*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:** KENT SOKMENSUER

CHAIRMAN

09/08/2020

Electronic Signature of Signing Officer/Director Detail

Date