

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000639

Entity Name: LINCOLN CENTER FOUNDATION, INC.

Current Principal Place of Business:

438 WEST BREVARD STREET
TALLAHASSEE, FL 32303

Current Mailing Address:

438 WEST BREVARD STREET
TALLAHASSEE, FL 32303

FEI Number: 32-0230230

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

LUCAS, GWEN
438 WEST BREVARD STREET
TALLAHASSEE, FL 32303 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 P
Name POWELL, ERROL H
Address 2013 AMBOISE COURT
City-State-Zip: TALLAHASSEE FL 32308

Title M
Name HENDERSON, MARVIN
Address 6937 GREENVILLE ROAD
City-State-Zip: TALLAHASSEE FL 32309

Title T
Name DENNIS, AL
Address 2271 GREENWICH WAY
City-State-Zip: TALLAHASSEE FL 32308

Title S
Name MECURIO, MARIA
Address 1804 MEDART DR
City-State-Zip: TALLAHASSEE FL 32303

Title M
Name CUMMINGS, CAROLYN ESQ
Address 462 WEST BREVARD ST
City-State-Zip: TALLAHASSEE FL 32305

Title M
Name HAWKINS, FAY
Address 1014 SILVER RIDGE DR
City-State-Zip: TALLAHASSEE FL 32305

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: ERROL H. POWELL

PRESIDENT

01/11/2017

Electronic Signature of Signing Officer/Director Detail

Date