

**2018 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	T
Name	DENNIS, AL
Address	2271 GREENWICH WAY
City-State-Zip:	TALLAHASSEE FL 32308

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

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

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

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

*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 POWELL****PRESIDENT****01/11/2018**

Electronic Signature of Signing Officer/Director Detail

Date