

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004203

Entity Name: VENOM FOUNDATION INC.**Current Principal Place of Business:**1660 N. MONROE ST., UNIT 9B
TALLAHASSEE, FL 32303**Current Mailing Address:**P O BOX 38042
TALLAHASSEE, FL 32315 US**FEI Number:** 27-2247978**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOWERY, JERRELL
3110 OKEEHHEEPKEE RD
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 EXECUTIVE DIRECTOR
Name LOWERY, JERRELL
Address 3110 OKEEHHEEPKEE RD
City-State-Zip: TALLAHASSEE FL 32303

Title VP
Name WHITEHURST, ANTHONY
Address 5628 SIOUX DR
City-State-Zip: TALLAHASSEE FL 32317

Title SECRETARY
Name BOOTHE-THOMPSON, JUANITA
Address 1126 RICHARDSON RD
City-State-Zip: TALLAHASSEE FL 32301

Title TREASURER
Name MORGAN-GATES, VICKIE L
Address 2422 ROSEMARY TERRACE
City-State-Zip: TALLAHASSEE FL 32303

Title PRESIDENT
Name MONGERIE, LENIN
Address 8265 HUNTERS RIDGE TRAIL
City-State-Zip: TALLAHASSEE FL 32312

Title BOARD MEMBER
Name HOOD, ZANE G
Address 285 WATER OAK DR
City-State-Zip: TALLAHASSEE FL 32305

Title PUBLIC RELATIONS DIRECTOR
Name WILLIAMS, KRISTIN
Address P O BOX 6901
City-State-Zip: TALLAHASSEE FL 32314

Title ASST SECRETARY
Name ADAMS, JASMINE
Address 3481 PACES FERRY RD
City-State-Zip: TALLAHASSEE FL 32309

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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: JERRELL LOWERY

EXECUTIVE DIRECTOR

01/14/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	BOARD MEMBER
Name	TOOMBS, MARLON
Address	2413 RAMBLEWOOD CT APT B
City-State-Zip:	TALLAHASSEE FL 32303