Entity Name: GUITARS OVER GUNS ORGANIZATION, INC.

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Current Principal Place of Business:

169 EAST FLAGLER STREET SUITE 1134 MIAMI, FL 33131-1205

Current Mailing Address:

DOCUMENT# N0800004627

169 EAST FLAGLER STREET SUITE 1134 MIAMI, FL 33131-1205 US

FEI Number: 26-2644682

Name and Address of Current Registered Agent:

BERNSTEIN, FRANK C 8850 SW 58 ST MIAMI, FL 33173 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

Officer/Director Detail :

Unicen/Dire	CLOI Delall.		
Title	CHAIRMAN, TREASURER, DIRECTOR	Title	PRESIDENT, DIRECTOR
Name	BERNSTEIN, ROBERT	Name	BERNSTEIN, CHAD
Address	4275 SAN AMARO DR	Address	8850 SW 58 ST
City-State-Zip	CORAL GABLES FL 33146	City-State-Zip:	MIAMI FL 33173
Title	DIRECTOR	Title	DIRECTOR
Name	JACOBSON, SCOTT	Name	TURNER, CHAD
Address	1903 SHERIDAN ROAD	Address	20 ISLAND AVE
City-State-Zip	BUFFALO GROVE IL 60089	City-State-Zip:	MIAMI BEACH FL 33139
Title	DIRECTOR	Title	DIRECTOR
Name	WEITZ, H JORDAN	Name	O'MALLEY, JACQUELINE
Address	400 WEST RIVIO ALTO DRIVE	Address	6855 RED RD
City-State-Zip	MIAMI FL 33139	City-State-Zip:	CORAL GABLES FL 33143
Title	DIRECTOR	Title	DIRECTOR
Name	PIERRE, GABRIEL JUNIOR	Name	BERRY, JIM
Address	10420 SW 8TH ST	Address	3030 NE QUAYSIDE LN
	BLDG 36 APT 101	City-State-Zip:	MIAMI FL 33138
City-State-Zip	PEMBROKE PINES FL 33025	0	
		Continues of	on page 2

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: F. CHAD BERNSTEIN

PRESIDENT/CEO

03/07/2022

Electronic Signature of Signing Officer/Director Detail

FILED Mar 07, 2022 Secretary of State 2470978889CC

Certificate of Status Desired: Yes

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	ANASTOS, LISA
Address	3525 S OCEAN BLVD APT 405
City-State-Zip:	PALM BEACH FL 33480
Title	DIRECTOR, SECRETARY
Name	LEGAGNEUR, J. GERARD
Address	1575 WEST AVE APT 6
City-State-Zip:	MIAMI BEACH FL 33139
Title	DIRECTOR
Name	HOWARD, EBONY
Address	36 UNION ST FLOOR 2
City-State-Zip:	JERSEY CITY NJ 07304

Title	DIRECTOR
Name	O'CONNELL, KELLIE
Address	657 W FULTON MARKET #406
City-State-Zip:	CHICAGO IL 60661
Title	DIDECTOR
The	DIRECTOR
Name	WALSH, DAVID
	2
Name	WALSH, DAVID