## 2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N08000007451

Entity Name: NONPROFITS FIRST, INC.

#### Current Principal Place of Business:

1818 S. AUSTRALIAN AVE SUITE 450 WEST PALM BEACH, FL 33409

## **Current Mailing Address:**

1818 S. AUSTRALIAN AVE SUITE 450 WEST PALM BEACH, FL 33409 US

## FEI Number: 26-3189428

## Name and Address of Current Registered Agent:

CECERE, JESSICA 1818 S. AUSTRALIAN AVE SUITE 450 WEST PALM BEACH , FL 33409 US Certificate of Status Desired: No

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	: JESSICA CECERE			01/12/2018			
	Electronic Signature of Registered Agent			Date			
Officer/Director Detail :							
Title	CEO	Title	VC				
Name	CECERE, JESSICA	Name	DICOMO, PHILIP				
Address	1818 S. AUSTRALIAN AVE SUITE 450	Address	1818 S. AUSTRALIAN AVE SUITE 450				
City-State-Zip:	WEST PALM BEACH FL 33409	City-State-Zip:	WEST PALM BEACH FL 3340	9			
Title	OFFICER	Title	SECRETARY				
Name	GRAY, ANDREW CPA	Name	SULLIVAN , JENNIFER				
Address	1818 S. AUSTRALIAN AVE SUITE 450	Address	1818 S. AUSTRALIAN AVE SUITE 450				
City-State-Zip:	WEST PALM BEACH FL 33409	City-State-Zip:	WEST PALM BEACH FL 3340	9			
Title	OFFICER	Title	CHAIRMAN				
Name	MONTGOMERY, MARK	Name	PIZZO, DEANA				
Address	1818 S. AUSTRALIAN AVE SUITE 450	Address	1818 S. AUSTRALIAN AVE SUITE 450				
City-State-Zip:	WEST PALM BEACH FL 33409	City-State-Zip:	WEST PALM BEACH FL 3340	9			
Title	TREASURER	Title	OFFICER				
Name	BROCKWAY , TOM	Name	PHILLIPS , BESSIE				
Address	1818 S. AUSTRALIAN AVE SUITE 450	Address	1818 S. AUSTRALIAN AVENUE SUITE 450	1			
City-State-Zip:	WEST PALM BEACH FL 33409	City-State-Zip:	WEST PALM BEACH FL 3340	9			

#### Continues 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: JESSICA CECERE

CHIEF EXECUTIVE	01/12/2018
OFFICER	

Electronic Signature of Signing Officer/Director Detail

# **Officer/Director Detail Continued :**

City-State-Zip: WEST PALM BEACH FL 33409

Title	OFFICER	Title	OFFICER
Name	FERGUSON, MAE	Name	FINGERHUT, NIKKI
Address	1818 S. AUSTRALIAN AVENUE SUITE 450	Address	1818 S. AUSTRALIAN AVENUE SUITE 450
City-State-Zip:	WEST PALM BEACH FL 33409	City-State-Zip:	WEST PALM BEACH FL 33409
<b>T</b> '4.		<b>T</b> '44	
Title	OFFICER	Title	OFFICER
Name	MARTIN , HENRY	Name	MILLER , TERESA
Address	1818 S. AUSTRALIAN AVENUE SUITE 450	Address	1818 S. AUSTRALIAN AVENUE SUITE 450
City-State-Zip:	WEST PALM BEACH FL 33409	City-State-Zip:	WEST PALM BEACH FL 33409
Title	OFFICER		
TILLE	OFFICER		
Name	NASH, MELISSA		
Address	1818 S. AUSTRALIAN AVENUE SUITE 450		